

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Democratic Women of Santa Barbara County

ADDRESS (number and street)

901 Via Rosita

Check if different
than previously
reported. (ACC)

Santa Barbara

CA

93110

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00399444

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

[]

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

[]

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Dexter, Jill, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Dexter, Jill, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Democratic Women of Santa Barbara County

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
01		01		2019

To:

M M	/	D D	/	Y Y Y Y
06		30		2019

	COLUMN A This Period	COLUMN B Calendar Year-to-Date												
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="4">2019</td></tr></table>	Y	Y	Y	Y	2019					<table><tr><td colspan="4">56907.12</td></tr></table>	56907.12			
Y	Y	Y	Y											
2019														
56907.12														
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="4">56907.12</td></tr></table>	56907.12												
56907.12														
(c) Total Receipts (from Line 19)	<table><tr><td colspan="4">5636.43</td></tr></table>	5636.43				<table><tr><td colspan="4">5636.43</td></tr></table>	5636.43							
5636.43														
5636.43														
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="4">62543.55</td></tr></table>	62543.55				<table><tr><td colspan="4">62543.55</td></tr></table>	62543.55							
62543.55														
62543.55														
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="4">15994.01</td></tr></table>	15994.01				<table><tr><td colspan="4">15994.01</td></tr></table>	15994.01							
15994.01														
15994.01														
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="4">46549.54</td></tr></table>	46549.54				<table><tr><td colspan="4">46549.54</td></tr></table>	46549.54							
46549.54														
46549.54														
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="4">0.00</td></tr></table>	0.00												
0.00														
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="4">0.00</td></tr></table>	0.00												
0.00														



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Democratic Women of Santa Barbara County

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	9

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1250.00	1250.00
(ii) Unitemized	4320.00	4320.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5570.00	5570.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5570.00	5570.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	66.43	66.43
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5636.43	5636.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5636.43	5636.43

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	9423.86	9423.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	9423.86	9423.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	5000.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	5000.00	5000.00
29. Other Disbursements (Including Non-Federal Donations).....	1570.15	1570.15
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15994.01	15994.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15994.01	15994.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5570.00	5570.00
34. Total Contribution Refunds (from Line 28(d))	5000.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	570.00	570.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	9423.86	9423.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	9423.86	9423.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ben-Horin, Barbara, , ,

Mailing Address P.O. Box 5238

City

Santa Barbara

State

CA

Zip Code

93150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Girls, Inc.

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 04 / 2019

Transaction ID : A-41109

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marcoe, Marsha, , ,

Mailing Address 4947 La Gama Way

City

Santa Barbara

State

CA

Zip Code

93111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Braille Institute

Occupation (for Individual)

Director Of Philanthropy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2019

Transaction ID : A-41155

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1250.00

TOTAL This Period (last page this line number only)..... ►

1250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. Bills Copy Shop

Mailing Address 1536 State Street

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Printing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41217

Amount of Each Disbursement this Period

288.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. C& I Consulting

Mailing Address 226 East Canon Perdido Street #D

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Bookkeeping

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41140

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. C& I Consulting

Mailing Address 226 East Canon Perdido Street #D

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Bookkeeping

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41141

Amount of Each Disbursement this Period

500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1288.73

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 18

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. C&I Consulting

Mailing Address 226 East Canon Perdido Street #D

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Bookkeeping

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				2	2		2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41154

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. C&I Consulting

Mailing Address 226 East Canon Perdido Street #D

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Bookkeeping

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	8		2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41185

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. C&I Consulting

Mailing Address 226 East Canon Perdido Street #D

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Bookkeeping

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				3	1		2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41218

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. C&I Consulting

Mailing Address 226 East Canon Perdido Street #D

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Bookkeeping

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 25 / 2019

FEC Identification Number

C

Transaction ID : B-41243

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CustomCanopy.co

Mailing Address 10423 Dickson Lane

City
CharlotteState
NCZip Code
28262Purpose of Disbursement
Office supplies

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 05 / 2019

FEC Identification Number

C

Transaction ID : B-41273

Amount of Each Disbursement this Period

899.00

MEMO: Subvendor of-Christina Schowe

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Hawkins, Judy, , ,

Mailing Address 426 West Victoria Street

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Speaker fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 21 / 2019

FEC Identification Number

C

Transaction ID : B-41124

Amount of Each Disbursement this Period

500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. Hawkins, Judy, , ,

Mailing Address 426 West Victoria Street

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Speaker fee

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41189

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hilton Garden Inn

Mailing Address 6878 Hollister Avenue

City
GoletaState
CAZip Code
93117Purpose of Disbursement
Meeting site

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41090

Amount of Each Disbursement this Period

474.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hilton Garden Inn

Mailing Address 6878 Hollister Avenue

City
GoletaState
CAZip Code
93117Purpose of Disbursement
Meeting site

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41142

Amount of Each Disbursement this Period

373.67

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1847.98

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. Integrated Solutions: PoliticalMailing Address 4142 Adams Avenue
Suite 103-550City
San DiegoState
CAZip Code
92116Purpose of Disbursement
Database

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2019

FEC Identification Number

C

Transaction ID : B-41204

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Integrated Solutions: PoliticalMailing Address 4142 Adams Avenue
Suite 103-550City
San DiegoState
CAZip Code
92116Purpose of Disbursement
Database

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2019

FEC Identification Number

C

Transaction ID : B-41227

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Integrated Solutions: PoliticalMailing Address 4142 Adams Avenue
Suite 103-550City
San DiegoState
CAZip Code
92116Purpose of Disbursement
Database

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2019

FEC Identification Number

C

Transaction ID : B-41237

Amount of Each Disbursement this Period

75.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. Integrated Solutions: PoliticalMailing Address 4142 Adams Avenue
Suite 103-550City
San DiegoState
CAZip Code
92116Purpose of Disbursement
Database

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2019

FEC Identification Number

C

Transaction ID : B-41267

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pacific Press Santa Barbara

Mailing Address 3833 Foothill Road

City
Santa BarbaraState
CAZip Code
93110Purpose of Disbursement
Printing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		16		2019

FEC Identification Number

C

Transaction ID : B-41138

Amount of Each Disbursement this Period

630.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pacific Press Santa Barbara

Mailing Address 3833 Foothill Road

City
Santa BarbaraState
CAZip Code
93110Purpose of Disbursement
Printing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2019

FEC Identification Number

C

Transaction ID : B-41149

Amount of Each Disbursement this Period

228.07

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

933.43

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. Pacific Press Santa Barbara

Mailing Address 3833 Foothill Road

City
Santa BarbaraState
CAZip Code
93110Purpose of Disbursement
Printing

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	9		2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41150

Amount of Each Disbursement this Period

19.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pizarro, Christina, , ,

Mailing Address 406 N. Ontare Road

City
Santa BarbaraState
CAZip Code
93105Purpose of Disbursement
Reimbursement--see memo below

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				2	9		2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41215

Amount of Each Disbursement this Period

294.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pizarro, Christina, , ,

Mailing Address 406 N. Ontare Road

City
Santa BarbaraState
CAZip Code
93105Purpose of Disbursement
Unitemized reimbursement for email account

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				1	5		2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41270

Amount of Each Disbursement this Period

72.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

385.96

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. Schowe, Christina, , ,

Mailing Address 930 Monte Drive

City
Santa BarbaraState
CAZip Code
93110Purpose of Disbursement
Reimbursement-see memo below

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41089

Amount of Each Disbursement this Period

899.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Schowe, Christina, , ,

Mailing Address 930 Monte Drive

City
Santa BarbaraState
CAZip Code
93110Purpose of Disbursement
Unitemized reimbursement for office supplies

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41122

Amount of Each Disbursement this Period

58.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Schowe, Christina, , ,

Mailing Address 930 Monte Drive

City
Santa BarbaraState
CAZip Code
93110Purpose of Disbursement
Unitemized reimbursement for office supplies

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41087

Amount of Each Disbursement this Period

39.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

996.80

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. Wix

Mailing Address 500 Terry Francois Boulevard

City
San FranciscoState
CAZip Code
94158Purpose of Disbursement
Website

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41216

Amount of Each Disbursement this Period

294.00

MEMO: Subvendor of-Christina

☒ Memo Item Pizarro

Full Name (Last, First, Middle Initial)

B. Wix

Mailing Address 500 Terry Francois Boulevard

City
San FranciscoState
CAZip Code
94158Purpose of Disbursement
Website

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41271

Amount of Each Disbursement this Period

72.00

MEMO: Subvendor of-Christina

☒ Memo Item Pizarro

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

8177.90

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. Batarse, Elizabeth, , ,

Mailing Address 305 Chapala Street #302

City
Santa Barbara

State
CA

Zip Code
93101

Purpose of Disbursement
Contribution refund

010

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2019

FEC Identification Number

C

Transaction ID : B-41272

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. Coalition Against Gun Violence

Mailing Address P.O. Box 699

City
SummerlandState
CAZip Code
93067Purpose of Disbursement
Civic contribution

012

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41214

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Community Environment Council

Mailing Address 26 West Anapamu Street

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Civic contribution

012

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41121

Amount of Each Disbursement this Period

211.15

MEMO: Subvendor of-Christina Schowe

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Pacific Pride Foundation

Mailing Address 608 Anacapa Street

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Civic contribution

012

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : B-41245

Amount of Each Disbursement this Period

244.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

744.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Women of Santa Barbara County

Full Name (Last, First, Middle Initial)

A. Pacific Pride Foundation

Mailing Address 608 Anacapa Street

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Civic contribution

012

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	25	/	2019

FEC Identification Number

C

Transaction ID : B-41244

Amount of Each Disbursement this Period

65.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Santa Barbara Response Network

Mailing Address 115 West Canon Perdido Street

City
Santa BarbaraState
CAZip Code
93101Purpose of Disbursement
Civic contribution

012

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	24	/	2019

FEC Identification Number

C

Transaction ID : B-41223

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Schowe, Christina, , ,

Mailing Address 930 Monte Drive

City
Santa BarbaraState
CAZip Code
93110Purpose of Disbursement
Reimbursement--see memo below

012

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2019

FEC Identification Number

C

Transaction ID : B-41120

Amount of Each Disbursement this Period

211.15

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

776.15

1520.15