

**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)

360 S. HOPE AVE. SUITE C300

☐ Check if different than previously reported. (ACC)

SANTA BARBARA

CA

93105

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / 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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2011

through

M M M / D D D / Y Y Y Y Y Y
12 31 2011

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

Type or Print Name of Treasurer DAVID L PERI

Signature of Treasurer

DAVID L PERI

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 31 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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 Y Y
07 / 01 / 2011 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2011		13851.01
(b) Cash on Hand at Beginning of Reporting Period.....	12115.86	
(c) Total Receipts (from Line 19)	32561.69	35591.69
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	44677.55	49442.70
7. Total Disbursements (from Line 31)	16720.58	21485.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27956.97	27956.97
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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. 06/2004)

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	7		0	1		2	0	1	1

To:

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

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).....	9181.16	9181.16
(ii) Unitemized	16609.87	19604.87
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	25791.03	28786.03
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	6770.66	6805.66
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ►	32561.69	35591.69
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.).....	0.00	0.00
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))..... ►	32561.69	35591.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	32561.69	35591.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	300.00	1687.58
(ii) Non-Federal Share.....	300.00	1687.57
(b) Other Federal Operating Expenditures	16120.58	16670.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16720.58	20045.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	1350.00
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 (2 U.S.C. §441a(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	0.00	0.00
(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)).....	0.00	0.00
29. Other Disbursements	0.00	90.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	16720.58	21485.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16420.58	19798.16

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	32561.69	35591.69
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32561.69	35591.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	16420.58	18358.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	16420.58	18358.16

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 25

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. KIKKA BAYLY

Mailing Address 1746 OLIVE ST

City

SANTA BARBARA

State

CA

Zip Code

93101

FEC ID number of contributing
federal political committee.

C

Name of Employer

KIKKA BAYLY

Occupation

EDUCATION MANAGEMENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 04 / 2011

Transaction ID : SA11AI.4185

Amount of Each Receipt this Period

35.00

EVENT

Full Name (Last, First, Middle Initial)

B. LAURA BENSON

Mailing Address 124 SUMIDA GARDENS LN

City

SANTA BARBARA

State

CA

Zip Code

93111

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTHEERN TRUST NA

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

290.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2011

Transaction ID : SA11AI.4252

Amount of Each Receipt this Period

290.91

In-kind - POSTAGE, THANK YOU CARDS

Full Name (Last, First, Middle Initial)

C. LAURA BENSON

Mailing Address 124 SUMIDA GARDENS LN

City

SANTA BARBARA

State

CA

Zip Code

93111

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTHEERN TRUST NA

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3971.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2011

Transaction ID : SA11AI.4266

Amount of Each Receipt this Period

3681.00

RETURN DEPOSIT

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

4006.91

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

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

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

FOR LINE NUMBER: PAGE 7 OF 25
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. ESTHER BORAH

Mailing Address PO BOX 3825

City State Zip Code
 SANTA BARBARA CA 93130

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 06 / 2011

Transaction ID : SA11AI.4206

Amount of Each Receipt this Period

500.00

DONATION

Full Name (Last, First, Middle Initial)

B. ESTHER BORAH

Mailing Address PO BOX 3825

City State Zip Code
 SANTA BARBARA CA 93130

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

10 / 19 / 2011

Transaction ID : SA11AI.4208

Amount of Each Receipt this Period

100.00

DONATION

Full Name (Last, First, Middle Initial)

C. ESTHER BORAH

Mailing Address PO BOX 3825

City State Zip Code
 SANTA BARBARA CA 93130

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

11 / 18 / 2011

Transaction ID : SA11AI.4209

Amount of Each Receipt this Period

100.00

EVENT

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

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

700.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 25

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. ESTHER BORAH

Mailing Address PO BOX 3825

City State Zip Code
 SANTA BARBARA CA 93130

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 02 / 2011

Transaction ID : SA11AI.4210

Amount of Each Receipt this Period

35.00

EVENT

Full Name (Last, First, Middle Initial)

B. JAN CLOUSE

Mailing Address 1722 PROSPECT AVE.

City State Zip Code
 SANTA BARBARA CA 93103

FEC ID number of contributing
federal political committee.

C

Name of Employer

JAN CLOUSE

Occupation

ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.03

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 05 / 2011

Transaction ID : SA11AI.4254

Amount of Each Receipt this Period

98.86

In-kind - RIBBON

Full Name (Last, First, Middle Initial)

C. JILL DEXTER

Mailing Address 901 VIA ROSITA

City State Zip Code
 SANTA BARBARA CA 93110

FEC ID number of contributing
federal political committee.

C

Name of Employer

JILL DEXTER

Occupation

APPAREL & FASHION PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.39

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 01 / 2011

Transaction ID : SA11AI.4249

Amount of Each Receipt this Period

770.39

In-kind - INVITATION PRINTING

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

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

904.25

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

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

FOR LINE NUMBER: PAGE 9 OF 25

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. JOYCE DUDLEY

Mailing Address 1112 SANTA BARBARA ST

City State Zip Code
 SANTA BARBARA CA 93101

FEC ID number of contributing
federal political committee.

C

Name of Employer
 SANTA BARBARA COUNTY

Occupation
 DISTRICT ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 18 / 2011

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period

180.00

MONETARY

Full Name (Last, First, Middle Initial)

B. GHITA GINBERG

Mailing Address 11 LA FLECHA LN

City State Zip Code
 SANTA BARBARA CA 93105

FEC ID number of contributing
federal political committee.

C

Name of Employer
 COMMUNITY ACTIVIST

Occupation
 GHITA GINBERG

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
 09 / 23 / 2011

Transaction ID : SA11AI.4216

Amount of Each Receipt this Period

250.00

EVENTS

Full Name (Last, First, Middle Initial)

C. GHITA GINBERG

Mailing Address 11 LA FLECHA LN

City State Zip Code
 SANTA BARBARA CA 93105

FEC ID number of contributing
federal political committee.

C

Name of Employer
 COMMUNITY ACTIVIST

Occupation
 GHITA GINBERG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 17 / 2011

Transaction ID : SA11AI.4218

Amount of Each Receipt this Period

200.00

MEMBERSHIP

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

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

630.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 25

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. GHITA GINBERG

Mailing Address 11 LA FLECHA LN

City State Zip Code
 SANTA BARBARA CA 93105

FEC ID number of contributing
federal political committee.

C

Name of Employer
 COMMUNITY ACTIVIST

Occupation
 GHITA GINBERG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2011

Transaction ID : SA11AI.4219

Amount of Each Receipt this Period

130.00

DONATION

Full Name (Last, First, Middle Initial)

B. GHITA GINBERG

Mailing Address 11 LA FLECHA LN

City State Zip Code
 SANTA BARBARA CA 93105

FEC ID number of contributing
federal political committee.

C

Name of Employer
 COMMUNITY ACTIVIST

Occupation
 GHITA GINBERG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 18 / 2011

Transaction ID : SA11AI.4220

Amount of Each Receipt this Period

120.00

EVENT

Full Name (Last, First, Middle Initial)

C. JOAN HEBERT

Mailing Address 5455 8th AVE #66

City State Zip Code
 CARPINTERIA CA 93013

FEC ID number of contributing
federal political committee.

C

Name of Employer
 N/A

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 11 / 2011

Transaction ID : SA11AI.4223

Amount of Each Receipt this Period

100.00

MEMBERSHIP

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

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

350.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 25

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. BEVERLY HERBERT

Mailing Address 575 LORRAINE AVE.

City State Zip Code
 SANTA BARBARA CA 93110

FEC ID number of contributing
federal political committee.

C

Name of Employer
 BEVERLY HERBERT

Occupation
 LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

10 / 17 / 2011

Transaction ID : SA11AI.4172

Amount of Each Receipt this Period

230.00

MONETARY

Full Name (Last, First, Middle Initial)

B. CHRISTINE LYON

Mailing Address 518 GARDEN LN

City State Zip Code
 SANTA BARBARA CA 93108

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PLANNED PARENTHOOD

Occupation
 EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

10 / 28 / 2011

Transaction ID : SA11AI.4215

Amount of Each Receipt this Period

100.00

EVENT

Full Name (Last, First, Middle Initial)

C. NANCY MILLER

Mailing Address 711 W. ORTEGA #9

City State Zip Code
 SANTA BARBARA CA 93101

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NORDMAN CORMANY HAIR & COMPTON

Occupation
 ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 04 / 2011

Transaction ID : SA11AI.4177

Amount of Each Receipt this Period

500.00

MONETARY

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

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

830.00

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

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

FOR LINE NUMBER: PAGE 12 OF 25

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. **NANCY MILLER**

Mailing Address 711 W. ORTEGA #9

City

SANTA BARBARA

State

CA

Zip Code

93101

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORDMAN CORMANY HAIR & COMPTON

Occupation

ATTORNEY

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 19 / 2011

Transaction ID : SA11AI.4180

Amount of Each Receipt this Period

100.00

MONETARY

Full Name (Last, First, Middle Initial)

B. **NANCY MILLER**

Mailing Address 711 W. ORTEGA #9

City

SANTA BARBARA

State

CA

Zip Code

93101

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORDMAN CORMANY HAIR & COMPTON

Occupation

ATTORNEY

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 04 / 2011

Transaction ID : SA11AI.4181

Amount of Each Receipt this Period

100.00

MONETARY

Full Name (Last, First, Middle Initial)

C. **KATHLEEN MODUGNO**

Mailing Address 2706 MESA SCHOOL LANE

City

SANTA BARBARA

State

CA

Zip Code

93109

FEC ID number of contributing
federal political committee.

C

Name of Employer

KATHLEEN MODUGNO

Occupation

CONTRACTOR

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 30 / 2011

Transaction ID : SA11AI.4205

Amount of Each Receipt this Period

35.00

EVENT

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

235.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 13 OF 25
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. ANNE SCHOWE

Mailing Address 930 MONTE DR.

City

SANTA BARBARA

State

CA

Zip Code

93110

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		2	7		2	0	1	1		

Transaction ID : SA11AI.4186

Amount of Each Receipt this Period

500.00

DONATION

Full Name (Last, First, Middle Initial)

B. NAOMI SCHWARTZ

Mailing Address 1889 EUCALYPTUS HILL RD

City

SANTA BARBARA

State

CA

Zip Code

93108

FEC ID number of contributing federal political committee.

C

Name of Employer

GILDEA FOUNDATION

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

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

Transaction ID : SA11AI.4199

Amount of Each Receipt this Period

70.00

EVENT

Full Name (Last, First, Middle Initial)

C. BETTY STEPHENS

Mailing Address 4400 VIA ABRIGADA

City

SANTA BARBARA

State

CA

Zip Code

93110

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.4188

Amount of Each Receipt this Period

500.00

DONATION

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

1070.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 25

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. BETTY STEPHENS

Mailing Address 4400 VIA ABRIGADA

City State Zip Code
 SANTA BARBARA CA 93110

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 02 / 2011

Transaction ID : SA11AI.4190

Amount of Each Receipt this Period

50.00

EVENT

Full Name (Last, First, Middle Initial)

B. MARY ELLEN WYLIE

Mailing Address 367 ALEX PL

City State Zip Code
 GOLETA CA 93117

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 12 / 2011

Transaction ID : SA11AI.4193

Amount of Each Receipt this Period

200.00

EVENT

Full Name (Last, First, Middle Initial)

C. MARY ELLEN WYLIE

Mailing Address 367 ALEX PL

City State Zip Code
 GOLETA CA 93117

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 30 / 2011

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period

70.00

EVENT

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

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

320.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 25

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. MARY ELLEN WYLIE

Mailing Address 367 ALEX PL

City
GOLETA

State
CA

Zip Code
93117

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

11 / 30 / 2011

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period

50.00

MEMBERSHIP

Full Name (Last, First, Middle Initial)

B. MARY ELLEN WYLIE

Mailing Address 367 ALEX PL

City
GOLETA

State
CA

Zip Code
93117

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

12 / 11 / 2011

Transaction ID : SA11AI.4196

Amount of Each Receipt this Period

85.00

DONATION

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

135.00

9181.16

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 25

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. HELENE SCHNEIDER FOR MAYOR 1311411

Mailing Address PO BOX 22606

City State Zip Code
 SANTA BARBARA CA 93121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.66

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 09 / 2011

Transaction ID : SA11C.4275

Amount of Each Receipt this Period

770.66

NEWSLETTER

Full Name (Last, First, Middle Initial)

B. LA COUNTY PROBATION OFFICERS UNION-AFSCME

Mailing Address 2500 WILSHIRE BLVD., STE. 1010

City State Zip Code
 LOS ANGELES CA 90057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 04 / 2011

Transaction ID : SA11C.4257

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. SALUD CARBAJAL FOR SUPERVISOR 2012 1260493

Mailing Address PO BOX 20084

City State Zip Code
 SANTA BARBARA CA 93120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 17 / 2011

Transaction ID : SA11C.4271

Amount of Each Receipt this Period

500.00

EVENT

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

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

6270.66

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 25

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. SALUD CARBAJAL FOR SUPERVISOR 2012 1260493

Mailing Address PO BOX 20084

City State Zip Code
 SANTA BARBARA CA 93120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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
 11 30 2011

Transaction ID : SA11C.4274

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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

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

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

500.00

6770.66

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

PAGE 18 OF 25

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. EMILY ALLEN

Mailing Address 701 E VICTORIA ST

City SANTA BARBARA State CA Zip Code 93103

Purpose of Disbursement
POSTAGE REIMBURSEMENT

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
11 / 07 / 2011
Transaction ID : SB21B.4245

Amount of Each Disbursement this Period

268.80

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 675 E SANTA CLARA ST

City VENTURA State CA Zip Code 93001

Purpose of Disbursement
POSTAGE

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
11 / 07 / 2011
Transaction ID : SB21B.4245.0

Amount of Each Disbursement this Period

268.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. LAURA BENSON

Mailing Address 124 SUMIDA GARDENS LN

City SANTA BARBARA State CA Zip Code 93111

Purpose of Disbursement
In-kind - POSTAGE, THANK YOU CARDS

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
10 / 02 / 2011
Transaction ID : SB21B.4253

Amount of Each Disbursement this Period

290.91

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

559.71

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

PAGE 19 OF 25

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. LAURA BENSON

Mailing Address 124 SUMIDA GARDENS LN

City SANTA BARBARA State CA Zip Code 93111

Purpose of Disbursement
REIMBURSEMENT - EVENT

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
10 / 15 / 2011
Transaction ID : SB21B.4235

Amount of Each Disbursement this Period

3681.00

Full Name (Last, First, Middle Initial)

B. FOUR SEASONS BILTMORE

Mailing Address 1260 CHANNEL DR

City SANTA BAARBARA State CA Zip Code 93108

Purpose of Disbursement
LUNCHEON

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
10 / 15 / 2011
Transaction ID : SB21B.4235.0

Amount of Each Disbursement this Period

3681.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. LAURA BENSON

Mailing Address 124 SUMIDA GARDENS LN

City SANTA BARBARA State CA Zip Code 93111

Purpose of Disbursement
EVENT REIMBURSEMENT

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
11 / 17 / 2011
Transaction ID : SB21B.4242

Amount of Each Disbursement this Period

3681.00

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

7362.00

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

PAGE 20 OF 25

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. FOUR SEASONS BILTMORE

Mailing Address 1260 CHANNEL DR

City SANTA BAARBARA State CA Zip Code 93108

Purpose of Disbursement
EVENT DEPOSIT

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
11 / 17 / 2011
Transaction ID : SB21B.4242.0

Amount of Each Disbursement this Period

3681.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JAN CLOUSE

Mailing Address 1722 PROSPECT AVE.

City SANTA BARBARA State CA Zip Code 93103

Purpose of Disbursement
In-kind - RIBBON

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
09 / 05 / 2011
Transaction ID : SB21B.4255

Amount of Each Disbursement this Period

98.86

Full Name (Last, First, Middle Initial)

C. JILL DEXTER

Mailing Address 901 VIA ROSITA

City SANTA BARBARA State CA Zip Code 93110

Purpose of Disbursement
In-kind - INVITATION PRINTING

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
10 / 01 / 2011
Transaction ID : SB21B.4251

Amount of Each Disbursement this Period

770.39

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

869.25

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

PAGE 21 OF 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. FOUR SEASONS BILTMORE

Mailing Address 1260 CHANNEL DR

City	State	Zip Code
SANTA BAARBARA	CA	93108

Purpose of Disbursement
EVENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2011

Transaction ID : SB21B.4159

Amount of Each Disbursement this Period

3489.40

Full Name (Last, First, Middle Initial)

B. NORDMAN CORMANY HAIR & COMPTON

Mailing Address 1000 TOWN CENTER DR

City	State	Zip Code
OXNARD	CA	93036

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2011

Transaction ID : SB21B.4232

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. SERVICE CENTER PRINTING

Mailing Address 810 GUTIERREZ ST

City	State	Zip Code
SANTA BARBARA	CA	93103

Purpose of Disbursement
STATIONARY

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2011

Transaction ID : SB21B.4161

Amount of Each Disbursement this Period

170.37

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4159.77

--

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

PAGE 22 OF 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

A. SERVICE CENTER PRINTING

Mailing Address 810 GUTIERREZ ST

City	State	Zip Code
SANTA BARBARA	CA	93103

Purpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		22		2011

Transaction ID : SB21B.4224

Amount of Each Disbursement this Period

100.81

Full Name (Last, First, Middle Initial)

B. UNIVERSITY CLUB OF SANTA BARBARA

Mailing Address 1332 SANTA BARBARA ST

City	State	Zip Code
SANTA BARBARA	CA	93101

Purpose of Disbursement
HOLIDAY TEA

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2011

Transaction ID : SB21B.4163

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. UNIVERSITY CLUB OF SANTA BARBARA

Mailing Address 1332 SANTA BARBARA ST

City	State	Zip Code
SANTA BARBARA	CA	93101

Purpose of Disbursement
HOLIDAY TEA

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2011

Transaction ID : SB21B.4165

Amount of Each Disbursement this Period

1489.24

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

2590.05

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

15540.78

SCHEDULE H1 (FEC Form 3X)**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Transaction ID : H1.4166

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

_____ Presidential-Only Election Year (28% Federal)

_____ Presidential and Senate Election Year (36% Federal)

_____ Senate-Only Election Year (21% Federal)

_____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☒ **or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal %

This ratio applies to (check all that apply):

Administrative ☒ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H1 (FEC Form 3X)**METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Transaction ID : H1.4202

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

_____ Presidential-Only Election Year (28% Federal)

_____ Presidential and Senate Election Year (36% Federal)

_____ Senate-Only Election Year (21% Federal)

_____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 25 OF 25

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

A. Full Name (Last, First, Middle Initial) PERI & ALVARADO CPA's, INC. Transaction ID : H4.4167			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 360 S HOPE AVE. SUITE C300			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">3375.15</div>	
City SANTA BARBARA	State CA	Zip Code 93105	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> 10 15 2011 </div> </div>	
Purpose of Disbursement: ACCOUNTING			<div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	
Activity or Event Identifier: Administrative			Date	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT				
<div style="border: 1px solid black; padding: 2px; text-align: right;">300.00</div>			<div style="border: 1px solid black; padding: 2px; text-align: right;">300.00</div>	
			<div style="border: 1px solid black; padding: 2px; text-align: right;">600.00</div>	

B. Full Name (Last, First, Middle Initial)			Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;"></div>	
City	State	Zip Code	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> </div> </div>	
Purpose of Disbursement:			<div style="border: 1px solid black; padding: 2px; text-align: center;"></div>	
Activity or Event Identifier:			Date	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT				
<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	

C. Full Name (Last, First, Middle Initial)			Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;"></div>	
City	State	Zip Code	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y Y </div> <div style="display: flex; justify-content: space-between;"> </div> </div>	
Purpose of Disbursement:			<div style="border: 1px solid black; padding: 2px; text-align: center;"></div>	
Activity or Event Identifier:			Date	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT				
<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px; text-align: right;">300.00</div>		<div style="border: 1px solid black; padding: 2px; text-align: right;">300.00</div>		<div style="border: 1px solid black; padding: 2px; text-align: right;">600.00</div>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px; text-align: right;">300.00</div>		<div style="border: 1px solid black; padding: 2px; text-align: right;">300.00</div>		<div style="border: 1px solid black; padding: 2px; text-align: right;">600.00</div>