

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**
Health Justice PAC

ADDRESS (number and street) 777 S. Figueroa Street #4050
Check if different than previously reported. (ACC) Los Angeles CA 90017

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00621466 3. IS THIS REPORT NEW (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 [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [03] / [16] / [2017] through [06] / [30] / [2017]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Alexander, Lori, , ,
Type or Print Name of Treasurer

Signature of Treasurer Alexander, Lori, , , [Electronically Filed] Date [07] / [31] / [2017]

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

Health Justice PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value="933.32"/>	<input type="text" value="933.32"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2233.32"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5000.00"/>	<input type="text" value="9000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7233.32"/>	<input type="text" value="9933.32"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="7000.00"/>	<input type="text" value="9700.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="233.32"/>	<input type="text" value="233.32"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="5675.91"/>	

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

Write or Type Committee Name

Health Justice PAC

Report Covering the Period: From: / / To: / /

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).....	5000.00	9000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5000.00	9000.00
(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)	5000.00	9000.00
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.).....	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)).....▶	5000.00	9000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5000.00	9000.00

DETAILED SUMMARY PAGE

of Disbursements

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	2000.00	2000.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2000.00	2000.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	7700.00
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	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 (Including Non-Federal Donations).....	0.00	0.00
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)) ..	7000.00	9700.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7000.00	9700.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	5000.00	9000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5000.00	9000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2000.00	2000.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2000.00	2000.00

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 19
(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)
Health Justice PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Prima Waste Management, Inc.
Mailing Address 12401 Woodruff Ave
Ste 10
City Downey State CA Zip Code 90241-5620
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 ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2017
Transaction ID : VSHCYEGM537
Amount of Each Receipt this Period
5000.00
 Memo Item
Refunded in Subsequent Period.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B.
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 M / D D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 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 M / D D D / Y Y Y Y Y Y
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
Health Justice PAC

Full Name (Last, First, Middle Initial) A. Kaufman Legal Group		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017
Mailing Address 777 S Figueroa St Ste 4050		FEC Identification Number C [REDACTED] Transaction ID : VSGDP9WQ2
City Los Angeles	State CA	Zip Code 90017-5864
Purpose of Disbursement Legal and Treasury Fees		Amount of Each Disbursement this Period [REDACTED] 223.50
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Kaufman Legal Group		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017
Mailing Address 777 S Figueroa St Ste 4050		FEC Identification Number C [REDACTED] Transaction ID : VSGDP9WQ2
City Los Angeles	State CA	Zip Code 90017-5864
Purpose of Disbursement Legal and Treasury Expenses		Amount of Each Disbursement this Period [REDACTED] 80.00
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. Kaufman Legal Group		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017
Mailing Address 777 S Figueroa St Ste 4050		FEC Identification Number C [REDACTED] Transaction ID : VSGDP9WQ2
City Los Angeles	State CA	Zip Code 90017-5864
Purpose of Disbursement Legal and Treasury Expenses		Amount of Each Disbursement this Period [REDACTED] 67.42
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 370.92
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
Health Justice PAC

Full Name (Last, First, Middle Initial) A. Kaufman Legal Group			Date of Disbursement MM / DD / YYYY 06 / 29 / 2017	
Mailing Address 777 S Figueroa St Ste 4050				
City Los Angeles	State CA	Zip Code 90017-5864		
Purpose of Disbursement Legal and Treasury Fees		Category/ Type 001	FEC Identification Number C Transaction ID : VSGDP9WQ2 Amount of Each Disbursement this Period 243.50	
Candidate Name				
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:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. Kaufman Legal Group			Date of Disbursement MM / DD / YYYY 06 / 29 / 2017	
Mailing Address 777 S Figueroa St Ste 4050				
City Los Angeles	State CA	Zip Code 90017-5864		
Purpose of Disbursement Legal and Treasury Expenses		Category/ Type 001	FEC Identification Number C Transaction ID : VSGDP9WQ2 Amount of Each Disbursement this Period 75.60	
Candidate Name				
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:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. Kaufman Legal Group			Date of Disbursement MM / DD / YYYY 06 / 29 / 2017	
Mailing Address 777 S Figueroa St Ste 4050				
City Los Angeles	State CA	Zip Code 90017-5864		
Purpose of Disbursement Legal and Treasury Expenses		Category/ Type 001	FEC Identification Number C Transaction ID : VSGDP9WQ2 Amount of Each Disbursement this Period 38.32	
Candidate Name				
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:	<input type="checkbox"/> Memo Item			

SUBTOTAL of Disbursements This Page (optional).....	357.42
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 Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
Health Justice PAC

Full Name (Last, First, Middle Initial) A. Kaufman Legal Group			Date of Disbursement MM / DD / YYYY 06 / 29 / 2017	
Mailing Address 777 S Figueroa St Ste 4050				
City Los Angeles	State CA	Zip Code 90017-5864		
Purpose of Disbursement Legal and Treasury Fees		Category/ Type 001	FEC Identification Number C Transaction ID : VSGDP9WQ2 Amount of Each Disbursement this Period 1043.50	
Candidate Name				
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:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. Kaufman Legal Group			Date of Disbursement MM / DD / YYYY 06 / 29 / 2017	
Mailing Address 777 S Figueroa St Ste 4050				
City Los Angeles	State CA	Zip Code 90017-5864		
Purpose of Disbursement Legal and Treasury Expenses		Category/ Type 001	FEC Identification Number C Transaction ID : VSGDP9WQ2 Amount of Each Disbursement this Period 85.20	
Candidate Name				
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:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. Kaufman Legal Group			Date of Disbursement MM / DD / YYYY 06 / 29 / 2017	
Mailing Address 777 S Figueroa St Ste 4050				
City Los Angeles	State CA	Zip Code 90017-5864		
Purpose of Disbursement Legal and Treasury Expenses		Category/ Type 001	FEC Identification Number C Transaction ID : VSGDP9WQ2 Amount of Each Disbursement this Period 42.40	
Candidate Name				
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:	<input type="checkbox"/> Memo Item			

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

1171.10

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 Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
Health Justice PAC

A. Kaufman Legal Group

Full Name (Last, First, Middle Initial)

Mailing Address 777 S Figueroa St
Ste 4050

City Los Angeles State CA Zip Code 90017-5864

Purpose of Disbursement
Legal and Treasury Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2017

FEC Identification Number
C

Transaction ID : VSGDP9WQ2

Amount of Each Disbursement this Period
100.56

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	100.56
TOTAL This Period (last page this line number only).....▶	2000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)
Health Justice PAC

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee			Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 10 / 2017		
Mailing Address 430 S Capitol St SE			FEC Identification Number C C00000935 Transaction ID : VSGDP9WED Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refunded in Subsequent Period. <input type="checkbox"/> Memo Item		
City Washington	State DC	Zip Code 20003-4024	Category/Type <input type="checkbox"/>		
Purpose of Disbursement Federal Contribution			Candidate Name Democratic Congressional Campaign Committee		
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:		

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item		
Purpose of Disbursement			Candidate Name		
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:		

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item		
Purpose of Disbursement			Candidate Name		
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 19
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Health Justice PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Fees
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="682.50"/>	Transaction ID : VSEF69H8935	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="682.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Fees
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="725.50"/>	Transaction ID : VSEF69H8943	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="725.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="45.45"/>	Transaction ID : VSEF69H8950	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="45.45"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1453.45"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 19
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Health Justice PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Fees
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="87.00"/>	Transaction ID : VSEF69H8968	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="87.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="31.12"/>	Transaction ID : VSEF69H8976	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="31.12"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="4.86"/>	Transaction ID : VSEF69H89X0	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4.86"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="122.98"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 19
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Health Justice PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="7.85"/>	Transaction ID : VSEF69H89Y8	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7.85"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Fees
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="441.00"/>	Transaction ID : VSEF69H8R78	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="441.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="174.63"/>	Transaction ID : VSEF69H8R86	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="174.63"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="623.48"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 19
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Health Justice PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="13.96"/>	Transaction ID : VSEF69H8R94	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="13.96"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Fees
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="1224.50"/>	Transaction ID : VSEF69H8KG9	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1224.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="0.92"/>	Transaction ID : VSEF69H8KH7	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.92"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1239.38"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 19
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Health Justice PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="25.58"/>	Transaction ID : VSEF69H8KJ5	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="25.58"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Fees
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="468.50"/>	Transaction ID : VSEF69H8RA2	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="468.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="10.31"/>	Transaction ID : VSEF69H8RB0	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10.31"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="504.39"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 19
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Health Justice PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Fees
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="769.00"/>	Transaction ID : VSEF69H8YY3	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="769.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="57.69"/>	Transaction ID : VSEF69H8YZ1	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="57.69"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="5.50"/>	Transaction ID : VSEF69H8Z40	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5.50"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="832.19"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 19
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Health Justice PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Fees
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="617.50"/>	Transaction ID : VSEF69H8Z09	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="617.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="103.00"/>	Transaction ID : VSEF69H8Z16	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="103.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period <input type="text" value="30.25"/>	Transaction ID : VSEF69H8Z32	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30.25"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="750.75"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 19
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Health Justice PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Fees
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period	Transaction ID : VSEF69H92K4	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="17.94"/>	<input type="text" value="0.00"/>	<input type="text" value="17.94"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period	Transaction ID : VSEF69H92M2	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="75.00"/>	<input type="text" value="0.00"/>	<input type="text" value="75.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Legal Group			Nature of Debt (Purpose): Legal and Treasury Expenses
Mailing Address 777 S Figueroa St Ste 4050			
City Los Angeles	State CA	Zip Code 90017-5864	

Outstanding Balance Beginning This Period	Transaction ID : VSEF69H92N0	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="56.35"/>	<input type="text" value="0.00"/>	<input type="text" value="56.35"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="149.29"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="5675.91"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="5675.91"/>