

**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

Herbalife International Inc. PAC

ADDRESS (number and street) ▼

800 W. Olympic Blvd

Suite 406

☐ Check if different than previously reported. (ACC)

Los Angeles

CA

90015

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00393298

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer John DeSimone

Signature of Treasurer

John DeSimone

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 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

Herbalife International Inc. PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
12		01		2015

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2015</div>		<div>81484.10</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>106589.63</div>	
(c) Total Receipts (from Line 19)	<div>8001.01</div>	<div>73033.39</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>114590.64</div>	<div>154517.49</div>
7. Total Disbursements (from Line 31).....	<div>4630.21</div>	<div>44557.06</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>109960.43</div>	<div>109960.43</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	



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

Herbalife International Inc. PAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2015

To:

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

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).....

7965.57

67187.07

(ii) Unitemized

35.44

5846.32

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

8001.01

73033.39

(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) ▶

8001.01

73033.39

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))..... ▶

8001.01

73033.39

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

8001.01

73033.39

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	630.21	7957.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	630.21	7957.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	36600.00
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	0.00
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)) ..	4630.21	44557.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4630.21	44557.06

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)	8001.01	73033.39
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8001.01	73033.39
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	630.21	7957.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	630.21	7957.06

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 20
(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
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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)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. Gentry Ellis

Mailing Address 1707 Tredegar Rd

City	State	Zip Code
Kernersville	NC	27284-3790

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Sr. Director of Manufacturing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR0NDESQH00P

Amount of Each Receipt this Period

99.90

Payroll Deduction: (\$33.34 Bi-Monthly)

Full Name (Last, First, Middle Initial)

B. Alan A Quan

Mailing Address 1766 Windsor Rd

City	State	Zip Code
San Marino	CA	91108-2526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR0NDESXV40P

Amount of Each Receipt this Period

199.95

Payroll Deduction: (\$66.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Richard Goudis

Mailing Address 26620 Alsace Dr

City	State	Zip Code
Calabasas	CA	91302-3806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

COO

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
12	/	31	/	2015

Transaction ID : VR0NDESTJ80P

Amount of Each Receipt this Period

1249.97

Payroll Deduction: (\$416.67 Bi-Weekly)

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

1549.82

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 20
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. Andrew Shao

Mailing Address 6117 Scotmist Dr

City	State	Zip Code
Rancho Palos Verdes	CA	90275-3350

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP Global Product Science & Safety

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR0NDESXWA0P

Amount of Each Receipt this Period

171.30

Payroll Deduction: (\$57.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Michael Kevin Kraus

Mailing Address 1636 S Barrington Ave

City	State	Zip Code
Los Angeles	CA	90025-4070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2015

Transaction ID : VR0NDES2VC0P

Amount of Each Receipt this Period

33.34

Payroll Deduction: (\$16.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Kenneth J Simon

Mailing Address 1600 Elm Ave

City	State	Zip Code
Manhattan Beach	CA	90266-5028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

SVP, Global Taxation & Treasury

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR0NDESXWF0P

Amount of Each Receipt this Period

428.52

Payroll Deduction: (\$142.86 Bi-Weekly)

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

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

633.16

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

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

FOR LINE NUMBER: PAGE 8 OF 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. James A Barton

Mailing Address 835 Hopkins Way

City

Redondo Beach

State

CA

Zip Code

90277-2020

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP Global Strategies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VR0NDESQGH1P

Amount of Each Receipt this Period

211.74

Payroll Deduction: (\$70.59 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Timothy M Waters

Mailing Address 2400 Harriman Ln

City

Redondo Beach

State

CA

Zip Code

90278-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VR0NDESXWK1P

Amount of Each Receipt this Period

378.88

Payroll Deduction: (\$126.32 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Johnny Jeong

Mailing Address 8732 Belmont St

City

Cypress

State

CA

Zip Code

90630-6018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Global Transportation Planning Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VR0NDESTKZ1P

Amount of Each Receipt this Period

42.78

Payroll Deduction: (\$14.29 Bi-Weekly)

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

633.40

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 20
(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			

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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. David Pezzullo

Mailing Address 990 W 190th St

City	State	Zip Code
Torrance	CA	90502-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Executive Vice President, Operations

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
12		31		2015

Transaction ID : VR0NDESXTZ1P

Amount of Each Receipt this Period

714.20

Payroll Deduction: (\$238.10 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Robert Levy

Mailing Address 2771 Forrester Dr

City	State	Zip Code
Los Angeles	CA	90064-3447

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Sr VP, Worldwide Sales

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
12		31		2015

Transaction ID : VR0NDESTM82P

Amount of Each Receipt this Period

714.20

Payroll Deduction: (\$238.10 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ronald L Riley

Mailing Address 3146 Julian Ave

City	State	Zip Code
Long Beach	CA	90808-4435

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP, Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : VR0NDESXV82P

Amount of Each Receipt this Period

171.30

Payroll Deduction: (\$57.15 Bi-Weekly)

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

1599.70

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 10 OF 20

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

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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. Kan He

Mailing Address 950 W 190th St

City

Torrance

State

CA

Zip Code

90502-1001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Director, Natural Product Method Desig

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
12 / 31 / 2015

Transaction ID : VR0NDESTKN2P

Amount of Each Receipt this Period

85.56

Payroll Deduction: (\$28.58 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Brian C Obermiller

Mailing Address 107 S Doheny Dr

City

Los Angeles

State

CA

Zip Code

90048-2934

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Sr. Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VR0NDESY0G3P

Amount of Each Receipt this Period

42.78

Payroll Deduction: (\$14.29 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. William J Calder

Mailing Address 724 N West Knoll Dr

City

West Hollywood

State

CA

Zip Code

90069-5230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Director, Office of the CEO

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
12 / 31 / 2015

Transaction ID : VR0NDESQGN3P

Amount of Each Receipt this Period

85.56

Payroll Deduction: (\$28.58 Bi-Weekly)

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

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

213.90

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

PAGE 11 OF 20

<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			

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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. Weilin Chen

Mailing Address 17118 Parkville Ave

City	State	Zip Code
Cerritos	CA	90703-1028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Principal Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR0NDESQGT3P

Amount of Each Receipt this Period

40.84

Payroll Deduction: (\$13.64 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Joseph W Pittman

Mailing Address 2204 Vanderbilt Ln

City	State	Zip Code
Redondo Beach	CA	90278-3149

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR0NDESXV24P

Amount of Each Receipt this Period

171.30

Payroll Deduction: (\$57.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Gwendolyn Richardson

Mailing Address 14472 Cottage Ln

City	State	Zip Code
Hawthorne	CA	90250-0635

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR0NDESXV74P

Amount of Each Receipt this Period

42.78

Payroll Deduction: (\$14.29 Bi-Weekly)

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

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

254.92

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 12 OF 20

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

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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. Roxanne Hernandez

Mailing Address 8505 Gulpasa Avenue

City

Playa Del Rey

State

CA

Zip Code

90293

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Director, Founders Circle & Chairmans

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 31 / 2015

Transaction ID : VR0NDESTKS4P

Amount of Each Receipt this Period

85.56

Payroll Deduction: (\$28.58 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Lance J. Harding

Mailing Address 3413 Inglewood Blvd

City

Los Angeles

State

CA

Zip Code

90066-1915

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP, Quality Assurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

12 / 31 / 2015

Transaction ID : VR0NDESTJF5P

Amount of Each Receipt this Period

171.30

Payroll Deduction: (\$57.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Bruce J Peters

Mailing Address 9903 Santa Monica Blvd

City

Beverly Hills

State

CA

Zip Code

90212-1671

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Sr. VP Distributor Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

12 / 31 / 2015

Transaction ID : VR0NDESXTX5P

Amount of Each Receipt this Period

371.42

Payroll Deduction: (\$123.81 Bi-Weekly)

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

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

628.28

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

PAGE 13 OF 20

<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
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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. J. Silvia Ramirez

Mailing Address 6400 Crescent Park E

City

Playa Vista

State

CA

Zip Code

90094-2338

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Sr. Dir - Distribution Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR0NDESXV66P

Amount of Each Receipt this Period

171.30

Payroll Deduction: (\$57.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Terry Adams

Mailing Address 3634 May St

City

Los Angeles

State

CA

Zip Code

90066-3606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Senior Director of DTS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR0NDESQGA6P

Amount of Each Receipt this Period

94.72

Payroll Deduction: (\$31.58 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Hal Apple

Mailing Address 1550 Greenfield Ave

City

Los Angeles

State

CA

Zip Code

90025-3468

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Senior Creative Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : VR0NDESQGF6P

Amount of Each Receipt this Period

142.84

Payroll Deduction: (\$47.62 Bi-Weekly)

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

408.86

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

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

PAGE 14 OF 20

<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
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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. Scott C. Harris

Mailing Address 1718 Wisteria Dr

City	State	Zip Code
Brea	CA	92821-4340

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Director, R&D Foods

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
12			31			2015					

Transaction ID : VR0NDESTKK6P

Amount of Each Receipt this Period

94.72

Payroll Deduction: (\$31.58 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Julie Delaney

Mailing Address 15442 Six M Ranch Lane

City	State	Zip Code
Torrance	CA	90804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Sr. Director - Operations

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
12			31			2015					

Transaction ID : VR0NDESQGX6P

Amount of Each Receipt this Period

85.56

Payroll Deduction: (\$28.58 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Suzanne Kirakossian

Mailing Address 990 W 190th St

City	State	Zip Code
Torrance	CA	90502-1014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Director, Transfer Pricing

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
12			31			2015					

Transaction ID : VR0NDESTM17P

Amount of Each Receipt this Period

94.72

Payroll Deduction: (\$31.58 Bi-Weekly)

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

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

275.00

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 20

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

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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. Solomon Benudiz

Mailing Address 3485 Fela Ave

City

Long Beach

State

CA

Zip Code

90808-3210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Director, Global Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 31 / 2015

Transaction ID : VR0NDESQ GK7P

Amount of Each Receipt this Period

85.56

Payroll Deduction: (\$28.58 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Kuei-Tu Chang

Mailing Address 931 Viewridge Dr

City

San Mateo

State

CA

Zip Code

94403-4056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

12 / 31 / 2015

Transaction ID : VR0NDESQ GR7P

Amount of Each Receipt this Period

171.30

Payroll Deduction: (\$57.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Sandra Strassner

Mailing Address 1521 9th St

City

Manhattan Beach

State

CA

Zip Code

90266-6126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP, Global Taxation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

12 / 31 / 2015

Transaction ID : VR0NDESX X38P

Amount of Each Receipt this Period

189.44

Payroll Deduction: (\$63.16 Bi-Weekly)

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

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

446.30

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

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

FOR LINE NUMBER: PAGE 16 OF 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. Patti R Sabel

Mailing Address 522 Hillgreen Dr

City

Beverly Hills

State

CA

Zip Code

90212-4110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP, Assistant Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 31 / 2015

Transaction ID : VR0NDESXVA8P

Amount of Each Receipt this Period

85.56

Payroll Deduction: (\$28.58 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Troy Hicks

Mailing Address 2509 Colt Rd

City

Rancho Palos Verdes

State

CA

Zip Code

90275-6577

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP, Supply Chain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

12 / 31 / 2015

Transaction ID : VR0NDESTKW8P

Amount of Each Receipt this Period

189.44

Payroll Deduction: (\$63.16 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Vasilios H Frankos

Mailing Address 205 Via Colusa

City

Redondo Beach

State

CA

Zip Code

90277-6739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

SVP Global Regulatory Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

12 / 31 / 2015

Transaction ID : VR0NDESQH59P

Amount of Each Receipt this Period

333.20

Payroll Deduction: (\$111.12 Bi-Weekly)

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

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

608.20

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

PAGE 17 OF 20

<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
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NAME OF COMMITTEE (In Full)

Herbalife International Inc. PAC

Full Name (Last, First, Middle Initial)

A. Pradip Mukerji

Mailing Address 7206 Avenida Altisima

City	State	Zip Code
Rancho Palos Verdes	CA	90275-4454

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Sr. VP, Research & Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2015					

Transaction ID : VR0NDESTMK9P

Amount of Each Receipt this Period

499.95

Payroll Deduction: (\$166.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mark J Schissel

Mailing Address 950 W 190th St

City	State	Zip Code
Torrance	CA	90502-1001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2015					

Transaction ID : VR0NDESXVK9P

Amount of Each Receipt this Period

171.30

Payroll Deduction: (\$57.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. Omar Ng

Mailing Address 800 W Olympic Blvd

City	State	Zip Code
Los Angeles	CA	90015-1360

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Manager, WWW DPC Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2015					

Transaction ID : VR0NDESXTV9P

Amount of Each Receipt this Period

42.78

Payroll Deduction: (\$14.29 Bi-Weekly)

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

714.03

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

7965.57

<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

Herbalife International Inc. PAC

A. Union Bank of California

Date of Disbursement

Transaction ID : VQZP5A4PN54

Category/
Type

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

Amount of Each Disbursement this Period

630.21

B.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Disbursement For:

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

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

630.21

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

630.21

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

Herbalife International Inc. PAC

1000.00

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

Herbalife International Inc. PAC

A. Pallone For Congress

Mailing Address PO Box 3176

City	State	Zip Code
Long Branch	NJ	07740-3176

Purpose of Disbursement	Contribution
1. To provide for the maintenance and repair of the building	10%
2. To provide for the maintenance and repair of the furniture and fixtures	10%
3. To provide for the maintenance and repair of the equipment	10%
4. To provide for the maintenance and repair of the vehicles	10%
5. To provide for the maintenance and repair of the other assets	10%
6. To provide for the maintenance and repair of the land	10%
7. To provide for the maintenance and repair of the other assets	10%
8. To provide for the maintenance and repair of the other assets	10%
9. To provide for the maintenance and repair of the other assets	10%
10. To provide for the maintenance and repair of the other assets	10%

Candidate Name

Frank Pallone Jr.

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

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : VQZP5A4PM77

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

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

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

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

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

1000.00

4000.00