

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 6380 Wilshire Blvd # 1612  
 Check if different than previously reported. (ACC) Los Angeles CA 90048

2. **FEC IDENTIFICATION NUMBER** ▼ C C00556506 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT  
CA 33

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)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on 06 / 03 / 2014 in the State of CA  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on   /   /   in the State of  

5. Covering Period 04 / 01 / 2014 through 05 / 14 / 2014

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 Jane Leiderman  
Signature of Treasurer Jane Leiderman [Electronically Filed] Date 07 / 30 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Ted Lieu For Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	281570.40	848332.40
(b) Total Contribution Refunds (from Line 20(d)) .....	1000.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	280570.40	847332.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	408443.52	450768.76
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	408443.52	450768.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	451313.64	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	65608.83	

**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 3 (Revised 12/2003)

Write or Type Committee Name

**Ted Lieu For Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	212660.76	0.00
(ii) Unitemized.....	13709.64	0.00
(iii) TOTAL of contributions from individuals ▶	226370.40	766431.40
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	55200.00	76701.00
(d) The Candidate.....	0.00	5200.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	281570.40	848332.40
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	55000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	55000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	281570.40	903332.40

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	408443.52	450768.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	1000.00
(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 20(a), (b), and (c)).....	1000.00	1000.00
21. OTHER DISBURSEMENTS .....	250.00	250.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	409693.52	452018.76

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	579436.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	281570.40
25. SUBTOTAL (add Line 23 and Line 24).....	861007.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	409693.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	451313.64

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Adler**

Mailing Address 9338 Beverlycrest Dr

City State Zip Code  
Beverly Hills CA 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Phyllis Morris Originals COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 23 / 2014

**Transaction ID : 11AI-736-I**

Amount of Each Receipt this Period  
300.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City State Zip Code  
Somerville MA 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 07 / 2014

**Transaction ID : 11AI-736-I-MEMO**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Kevin Allred**

Mailing Address 945 Teakwood Rd

City State Zip Code  
Brentwood CA 90049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munger, Tolles & Olson Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 07 / 2014

**Transaction ID : 11AI-628-I**

Amount of Each Receipt this Period  
500.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11AI-628-I-MEMO**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Alex Angelo**

Mailing Address 1721 N Sepulveda Blvd

City State Zip Code 90226

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Angelo & Di Monda LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-963-I**

Amount of Each Receipt this Period  
2500.00

Earmarked through Angelo & Di Monda, LLP. Date received by conduit in memo record below.

**C.** Full Name (Last, First, Middle Initial)  
**Angelo & Di Monda, LLP**

Mailing Address 1721 N Sepulveda Blvd

City Manhattan Beach State CA Zip Code 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-963-I-MEMO**

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bruce Abbott**

Mailing Address 11948 Chaparal St

City State Zip Code  
Brentwood CA 90049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munger, Tolles and Olson LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 27 / 2014

**Transaction ID : 11AI-651**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Adler**

Mailing Address 960 Rainbow Dr

City State Zip Code  
Glendora CA 91741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Edison International Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 09 / 2014

**Transaction ID : 11AI-563**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Adler**

Mailing Address 960 Rainbow Dr

City State Zip Code  
Glendora CA 91741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Edison International Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 09 / 2014

**Transaction ID : 11AI-564**

Amount of Each Receipt this Period  
2600.00

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

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

5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Sara Adler</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 960 Rainbow Dr		<b>Transaction ID : 11AI-565</b>
City Glendora	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Scripps College	Occupation Professor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>B. Sara Adler</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 960 Rainbow Dr		<b>Transaction ID : 11AI-566</b>
City Glendora	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Scripps College	Occupation Professor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>C. Carl Albert</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 10940 Bellagio Rd		<b>Transaction ID : 11AI-723</b>
City Los Angeles	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Carl Albert	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7800.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 9 OF 141  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jack Allen**

Mailing Address 15015 Bestor Blvd

City Bradfordwoods State PA Zip Code 15015

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : 11AI-718**

Amount of Each Receipt this Period  
 250.00

500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jack Allen**

Mailing Address 15015 Bestor Blvd

City Bradfordwoods State PA Zip Code 15015

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : 11AI-722**

Amount of Each Receipt this Period  
 250.00

500.00

**C.** Full Name (Last, First, Middle Initial)  
**Harvey L. Alpern**

Mailing Address 1223 Wilshire Blvd # 756

City Santa Monica State CA Zip Code 90403

FEC ID number of contributing federal political committee. **C**

Name of Employer Alpern Consulting Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-827**

Amount of Each Receipt this Period  
 250.00

250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Amiri**

Mailing Address 534 14th St

City State Zip Code  
Manhattan Beach CA 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nutricion Fundamental, Inc CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-865**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Sheila L Ardalan**

Mailing Address 5382 Circle Dr

City State Zip Code  
Sherman Oaks CA 91401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Business Development and Client Sevice Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-648**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Hajir Ardebili**

Mailing Address 2225 S Beverly Glen Blvd # 304

City State Zip Code  
Los Angeles CA 90064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kelley Drye Warren LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-869**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Andre Berger**

Mailing Address 333 S Oakhurst Dr

City State Zip Code  
Beverly Hills CA 90212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rejuvalife Vitality Institute Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 12 / 2014

**Transaction ID : 11AI-627-I**

Amount of Each Receipt this Period  
1000.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City State Zip Code  
Somerville MA 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 25 / 2014

**Transaction ID : 11AI-627-I-MEMO**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Basil Besh**

Mailing Address 39180 Farwell Dr

City State Zip Code  
Fremont CA 94538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 08 / 2014

**Transaction ID : 11AI-1003-I**

Amount of Each Receipt this Period  
1600.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

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

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

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11AI-1003-I-MEMO**

Amount of Each Receipt this Period  
1600.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Blinderman**

Mailing Address 1758 Clear View Dr

City Beverly Hills State CA Zip Code 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Not employed Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2014

**Transaction ID : 11AI-832-I**

Amount of Each Receipt this Period  
250.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

**C.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2014

**Transaction ID : 11AI-832-I-MEMO**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George Balfour**

Mailing Address 11538 Rubio Ave

City Granada Hills State CA Zip Code 91344

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 11 / 2014**

**Transaction ID : 11AI-696**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**George Balfour**

Mailing Address 11538 Rubio Ave

City Granada Hills State CA Zip Code 91344

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 09 / 2014**

**Transaction ID : 11AI-870**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Barona Band of Mission Indians**

Mailing Address 1095 Barona Rd

City Lakeside State CA Zip Code 92040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 09 / 2014**

**Transaction ID : 11AI-741**

Amount of Each Receipt this Period  
**2600.00**

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

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

**3050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Felicia Bhe**

Mailing Address 228 American River Canyon Dr

City State Zip Code  
Folsom CA 95630

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cal Asian Info

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-934**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Brent Bickett**

Mailing Address 510 1St St

City State Zip Code  
Saint Augustine FL 32084

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fidelity National Financial President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-761**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Sherri Bird**

Mailing Address 22800 Savi Ranch Parkway

City State Zip Code  
Yorba Linda CA 92887

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
FNF-Bancserv Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-763**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Fred Birnberg**

Mailing Address Info requested

City: Newport Beach State: CA Zip Code: 92663

FEC ID number of contributing federal political committee: **C**

Name of Employer: Fred Birnberg Occupation: Businessperson

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 04 / 30 / 2014

**Transaction ID : 11AI-750**

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael B Bossard**

Mailing Address 326 Country Club

City: Simi Valley State: CA Zip Code: 93065

FEC ID number of contributing federal political committee: **C**

Name of Employer: Michael B Bossard Occupation: Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 11 / 2014

**Transaction ID : 11AI-685**

Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
**William S Breal**

Mailing Address 2250 Hayes St

City: San Francisco State: CA Zip Code: 94117

FEC ID number of contributing federal political committee: **C**

Name of Employer: William S Breal Occupation: Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 04 / 30 / 2014

**Transaction ID : 11AI-762**

Amount of Each Receipt this Period: 1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brad Brian**

Mailing Address 1150 s Arroyo Blvd

City Pasadena State CA Zip Code 91105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munger Tolles & Olson LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 03 / 2014

**Transaction ID : 11AI-397**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Carol Burton**

Mailing Address 6487 Onyx Pl

City Carlsbad State CA Zip Code 92009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Carol Burton Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-646**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**California Orthopaedic ASSN PAC**

Mailing Address 1246 Ps St

City Sacramento State CA Zip Code 95814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 03 / 2014

**Transaction ID : 11AI-561**

Amount of Each Receipt this Period  
 1000.00

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dustin Callas**

Mailing Address 6383 Arizona Cir

City Los Angeles State CA Zip Code 90045

FEC ID number of contributing federal political committee. **C**

Name of Employer CourtCall Occupation CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 02 / 2014

**Transaction ID : 11AI-393**

Amount of Each Receipt this Period  
 1000.00

1100.00

**B.** Full Name (Last, First, Middle Initial)  
**Dennis Chan**

Mailing Address 1938 E California Blvd

City Pasadena State CA Zip Code 91108

FEC ID number of contributing federal political committee. **C**

Name of Employer Dennis Chan Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-890**

Amount of Each Receipt this Period  
 2500.00

2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Wing C Chan**

Mailing Address 1668 S Galfield

City Alhambra State CA Zip Code 91801

FEC ID number of contributing federal political committee. **C**

Name of Employer Wing C Chan Occupation M.D.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-891**

Amount of Each Receipt this Period  
 2500.00

2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eudeen Chang**

Mailing Address 3 Park Plaza # 1100

City Irvine State CA Zip Code 92614

FEC ID number of contributing federal political committee. **C**

Name of Employer Jeffer Mangels Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-854**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Wai-Yan Sandy Chau**

Mailing Address 2416 Summit Dr

City Burlingame State CA Zip Code 94010

FEC ID number of contributing federal political committee. **C**

Name of Employer Trident USA Occupation Founder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-657**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Wai-Yan Sandy Chau**

Mailing Address 2416 Summit Dr

City Burlingame State CA Zip Code 94010

FEC ID number of contributing federal political committee. **C**

Name of Employer Trident USA Occupation Founder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-658**

Amount of Each Receipt this Period  
 2600.00

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

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

6200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Albert C Chen**

Mailing Address 3440 Lomita Blvd # 346

City Torrance State CA Zip Code 90505

FEC ID number of contributing federal political committee. **C**

Name of Employer Albert Chen Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-819**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jong L Chen**

Mailing Address 39414 J St

City Sacramento State CA Zip Code 95819

FEC ID number of contributing federal political committee. **C**

Name of Employer Jong L Chen Occupation Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-892**

Amount of Each Receipt this Period  
 1600.00

**C.** Full Name (Last, First, Middle Initial)  
**Jong L Chen**

Mailing Address 39414 J St

City Sacramento State CA Zip Code 95819

FEC ID number of contributing federal political committee. **C**

Name of Employer Jong L Chen Occupation Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-897**

Amount of Each Receipt this Period  
 1000.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Oi-Lin Chen**

Mailing Address 1625 Abalone Ave

City Torrance State CA Zip Code 90501

FEC ID number of contributing federal political committee. **C**

Name of Employer Sunrider Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : 11AI-801**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Oi-Lin Chen**

Mailing Address 1625 Abalone Ave

City Torrance State CA Zip Code 90501

FEC ID number of contributing federal political committee. **C**

Name of Employer Sunrider Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : 11AI-802**

Amount of Each Receipt this Period  
2400.00

**C.** Full Name (Last, First, Middle Initial)  
**Tei-Fu Chen**

Mailing Address 1625 Abalone Ave

City Torrance State CA Zip Code 90501

FEC ID number of contributing federal political committee. **C**

Name of Employer Sunrider International Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : 11AI-799**

Amount of Each Receipt this Period  
2600.00

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

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

7600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tei-Fu Chen**

Mailing Address 1625 Abalone Ave

City Torrance State CA Zip Code 90501

FEC ID number of contributing federal political committee. **C**

Name of Employer Sunrider International Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 01 / 2014

**Transaction ID : 11AI-800**

Amount of Each Receipt this Period  
2400.00

**B.** Full Name (Last, First, Middle Initial)  
**John Chiang**

Mailing Address 3538 Torrance Blvd

City Inglewood State CA Zip Code 90303

FEC ID number of contributing federal political committee. **C**

Name of Employer State of CA Occupation Controller

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
418.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 10 / 2014

**Transaction ID : 11AI-785**

Amount of Each Receipt this Period  
168.00

**C.** Full Name (Last, First, Middle Initial)  
**Ming C Chiang**

Mailing Address 4802 Konya Dr

City Torrance State CA Zip Code 90503

FEC ID number of contributing federal political committee. **C**

Name of Employer LA County Occupation Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2014

**Transaction ID : 11AI-907**

Amount of Each Receipt this Period  
500.00

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

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

3068.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin Chiarello**

Mailing Address 9 Malea

City Laguna Beach State CA Zip Code 92677

FEC ID number of contributing federal political committee. **C**

Name of Employer Fidelity Nat'l Financial Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-641**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Chuk**

Mailing Address 4055 Alta Vista

City La Canada Flintridge State CA Zip Code 91011

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Info requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-767**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Arnold C Cinman**

Mailing Address 10568 Wilkins Ave

City Los Angeles State CA Zip Code 90024

FEC ID number of contributing federal political committee. **C**

Name of Employer Arnold C Cinman Occupation M.D.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-894**

Amount of Each Receipt this Period  
 1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John H. Cole**

Mailing Address 234 E Colorado Blvd # 220

City Pasadena State CA Zip Code 91101

FEC ID number of contributing federal political committee. **C**

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-824**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Scott J Corwin**

Mailing Address 11766 Wilshire Blvd

City Los Angeles State CA Zip Code 90025

FEC ID number of contributing federal political committee. **C**

Name of Employer Scott Corwin Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-902**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeffrey L Crafits**

Mailing Address 100 Pacifica

City Irvine State CA Zip Code 92618

FEC ID number of contributing federal political committee. **C**

Name of Employer Crafits Law Firm Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-682**

Amount of Each Receipt this Period  
 500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Vincent J Davitt**

Mailing Address 3620 Figueroa St

City: Glendale State: CA Zip Code: 91206

FEC ID number of contributing federal political committee: **C**

Name of Employer: Vincent Davitt Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 04 / 11 / 2014

**Transaction ID : 11AI-647**

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Albert Del Masso**

Mailing Address 2106 Williams St

City: San Leandro State: CA Zip Code: 94577

FEC ID number of contributing federal political committee: **C**

Name of Employer: Del Masso Produce Occupation: Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 05 / 14 / 2014

**Transaction ID : 11AI-886**

Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Steve Delavega**

Mailing Address 4610 E Meadowview Dr

City: State: Zip Code: 85298

FEC ID number of contributing federal political committee: **C**

Name of Employer: Fidelity National Title Occupation: Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 30 / 2014

**Transaction ID : 11AI-769**

Amount of Each Receipt this Period: 250.00

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

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

2250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gawesh Devendra**

Mailing Address 22347 N Summit Ridge Cir

City Chatsworth State CA Zip Code 91311

FEC ID number of contributing federal political committee. **C**

Name of Employer Simi San Fernando Valley Urology Occupation Urologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-908**

Amount of Each Receipt this Period  
**300.00**

**B.** Full Name (Last, First, Middle Initial)  
**Gawesh Devendra**

Mailing Address 22347 N Summit Ridge Cir

City Chatsworth State CA Zip Code 91311

FEC ID number of contributing federal political committee. **C**

Name of Employer Simi San Fernando Valley Urology Occupation Urologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-930**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Eric Early**

Mailing Address 4860 Glencairn Rn

City Los Angeles State CA Zip Code 90027

FEC ID number of contributing federal political committee. **C**

Name of Employer Early Sullivan Etat Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-673**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1800.00**

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

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

FOR LINE NUMBER: PAGE 26 OF 141  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eric Early**

Mailing Address 4860 Glencairn Rn

City Los Angeles State CA Zip Code 90027

FEC ID number of contributing federal political committee. **C**

Name of Employer Early Sullivan Etat Occupation Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-674**

Amount of Each Receipt this Period  
 750.00

Amount of Each Receipt this Period  
 1750.00

**B.** Full Name (Last, First, Middle Initial)  
**Debby Edwards**

Mailing Address 111 N Sepulveda Blvd

City Manhattan Beach State CA Zip Code 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Emergent Medical Associates Occupation Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : 11AI-797**

Amount of Each Receipt this Period  
 25.00

Amount of Each Receipt this Period  
 275.00

**C.** Full Name (Last, First, Middle Initial)  
**Irv Edwards**

Mailing Address 111 N Sepulveda Blvd

City Manhattan Beach State CA Zip Code 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer President Occupation Emergent Medical Associates

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : 11AI-798**

Amount of Each Receipt this Period  
 25.00

Amount of Each Receipt this Period  
 275.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Epstein**

Mailing Address 841 Leonard Rd

City State Zip Code  
Brentwood CA 90049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munger Tolles & Olson Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11AI-788**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Esbenshade**

Mailing Address 718 S Arroyo Blvd

City State Zip Code  
Pasadena CA 91105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
n/a Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-692**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Allen Chulin Fang**

Mailing Address 54 Albergo Ct

City State Zip Code  
Palos Verdes Estates CA 90275

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Max Moulding, Inc Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-672**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 28 OF 141

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bahman Fathi**

Mailing Address **PO Box 584**

City **Encino** State **CA** Zip Code **91335**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Bahman Fathi** Occupation **Consultant**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 09 / 2014**

**Transaction ID : 11AI-866**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Sharon Feng**

Mailing Address **1230 Stockton St**

City **San Francisco** State **CA** Zip Code **94133**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Chung Chou City** Occupation **Manager**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 09 / 2014**

**Transaction ID : 11AI-845**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Irwin Field**

Mailing Address **300 N Swall Dr**

City **Beverly Hills** State **CA** Zip Code **90211**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Liberty Vegetable Oil Co.** Occupation **Executive**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 11 / 2014**

**Transaction ID : 11AI-636**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

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

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

\_\_\_\_\_ 1750.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Irwin Field**

Mailing Address 300 N Swall Dr

City Beverly Hills State CA Zip Code 90211

FEC ID number of contributing federal political committee. **C**

Name of Employer Liberty Vegetable Oil Co. Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-822**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Peter J Filler**

Mailing Address 723 Barbara Ave

City Solana Beach State CA Zip Code 92075

FEC ID number of contributing federal political committee. **C**

Name of Employer Fileity National Title Group Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-683**

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
**John J Fisher**

Mailing Address 101 A Clay St

City San Francisco State CA Zip Code 94111

FEC ID number of contributing federal political committee. **C**

Name of Employer Pisces, Inc Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 08 / 2014

**Transaction ID : 11AI-813**

Amount of Each Receipt this Period  
2600.00

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

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

3950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul Flores**

Mailing Address 1615 Via Roma Cir

City State Zip Code  
Corona CA 92881

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Paul Flores Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : 11AI-744**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Cynthia Friend**

Mailing Address 6011 Woodfern Dr

City State Zip Code  
Palos Verdes Estates CA 90275

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fidelity National Title Company President Los Angeles County

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 11 / 2014

**Transaction ID : 11AI-681**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jack A Frydrych**

Mailing Address 5345 Oak Park Ave

City State Zip Code  
Encino CA 91316

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Jack Frydrych Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2014

**Transaction ID : 11AI-906**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ada Gardiner**

Mailing Address 6503 Farm To Market Rd

City Bonners Ferry State ID Zip Code 83805

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : 11AI-1561**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Garrett**

Mailing Address 225 S Lake Ave # 1400

City Pasadena State CA Zip Code 91101

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-667**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Paul J. Glass**

Mailing Address 17655 Vincennes St

City Northridge State CA Zip Code 91325

FEC ID number of contributing federal political committee. **C**

Name of Employer Paul Glass Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-856**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tamerlin Godley**

Mailing Address 1300 Glen Oaks Bld

City Pasadena State CA Zip Code 91105

FEC ID number of contributing federal political committee. **C**

Name of Employer Tmerlin Godley Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-677**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Julian A. Gold**

Mailing Address 526 N Palm Dr

City Beverly Hills State CA Zip Code 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Julian A. Gold Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-864**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Joe Goodman**

Mailing Address 5295 Beachcomben Ct

City San Diego State CA Zip Code 92130

FEC ID number of contributing federal political committee. **C**

Name of Employer Chicago Title Company Occupation VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-634**

Amount of Each Receipt this Period  
 500.00

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

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

1250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Govenar**

Mailing Address 1370 Vallejo Way

City Sacramento State CA Zip Code 95818

FEC ID number of contributing federal political committee. **C**

Name of Employer Governmental Advocates Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 14 / 2014**

**Transaction ID : 11AI-803**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**James Gow**

Mailing Address 19342 Sierra Perla Rd

City Irvine State CA Zip Code 92603

FEC ID number of contributing federal political committee. **C**

Name of Employer Alcon Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 11 / 2014**

**Transaction ID : 11AI-590**

Amount of Each Receipt this Period  
**350.00**

**C.** Full Name (Last, First, Middle Initial)  
**James Graf**

Mailing Address 1425 A Palisades Beach Rd

City Santa Monica State CA Zip Code 90401

FEC ID number of contributing federal political committee. **C**

Name of Employer Silver Acquisition Corporation Occupation CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 08 / 2014**

**Transaction ID : 11AI-739**

Amount of Each Receipt this Period  
**500.00**

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

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

**1850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rosalyn Gruen**

Mailing Address 1333 S Beverly Glen Blvd # 702

City State Zip Code  
Beverly Hills CA 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
n/a Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2014

**Transaction ID : 11AI-826**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**M Guerrein**

Mailing Address 17 Chatham

City State Zip Code  
Manhattan Beach CA 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rancho Los Angeles Nat Rehab Center Physicain

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 11 / 2014

**Transaction ID : 11AI-649**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**M Guerrein**

Mailing Address 17 Chatham

City State Zip Code  
Manhattan Beach CA 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rancho Los Angeles Nat Rehab Center Physicain

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2014

**Transaction ID : 11AI-879**

Amount of Each Receipt this Period  
125.00

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

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Janet Halbert**

Mailing Address 10641 Missouri Ave

City Los Angeles State CA Zip Code 90025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
JRH Consulting Group Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 02 / 2014

**Transaction ID : 11AI-626-I**

Amount of Each Receipt this Period  
250.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 25 / 2014

**Transaction ID : 11AI-626-I-MEMO**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**C.** Full Name (Last, First, Middle Initial)  
**John Forest Hilbert**

Mailing Address 1230 Columbia St

City San Diego State CA Zip Code 92101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Andersen Hilbert & Parker LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : 11AI-964-I**

Amount of Each Receipt this Period  
250.00

Earmarked through Andersen Hilbert & Parker LLP. Date recieved by conduit in memo record below.

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Andersen Hilbert & Parker LLP**

Mailing Address 1230 Columbia St

City San Diego State CA Zip Code 92101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-964-I-MEMO**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Ted Halper**

Mailing Address 17243 Aveneda Del Herradura

City Marina Del Rey State CA Zip Code 90291

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
n/a Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 08 / 2014

**Transaction ID : 11AI-740**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert J Hanna**

Mailing Address 1136 Devonshire Dr

City San Diego State CA Zip Code 92107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Robert J Hanna Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-679**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Helm**

Mailing Address 355 S Grand Ave

City Los Angeles State CA Zip Code 90071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munger, Tolles & Olson LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : 11AI-395**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**John D Hershberger**

Mailing Address 1325 Pacific Highway

City San Diego State CA Zip Code 92101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
John D Hershberger Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-670**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Joy O. Higa**

Mailing Address 2208 Elm Ave

City Manhattan Beach State CA Zip Code 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
United Health Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-862**

Amount of Each Receipt this Period  
 500.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jin Hong**

Mailing Address 2716 Winthrop Ave

City Arcadia State CA Zip Code 91007

FEC ID number of contributing federal political committee. **C**

Name of Employer SCPMG Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-592**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Hopkins**

Mailing Address 1061 Via Chaparal

City Santa Barbara State CA Zip Code 93105

FEC ID number of contributing federal political committee. **C**

Name of Employer Thomas Hopkins Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-749**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ming-Chang Horng**

Mailing Address 5667 Blair Dr

City Cleveland State OH Zip Code 44143

FEC ID number of contributing federal political committee. **C**

Name of Employer Ming-Chang Horng Occupation Businessperson

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-671**

Amount of Each Receipt this Period  
 1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald Howarth**

Mailing Address 50 Balboa Coves

City Newport Beach State CA Zip Code 92663

FEC ID number of contributing federal political committee. **C**

Name of Employer Lawyers Title Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-684**

Amount of Each Receipt this Period  
 350.00

**B.** Full Name (Last, First, Middle Initial)  
**Rung-Fang Hsu**

Mailing Address 2106 Dark Canyon Dr

City State Zip Code 96570

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-914**

Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Rung-Fang Hsu**

Mailing Address 2106 Dark Canyon Dr

City State Zip Code 96570

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-921**

Amount of Each Receipt this Period  
 100.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rodney Huddleston**

Mailing Address 849 S Broadway

City Los Angeles State CA Zip Code 90014

FEC ID number of contributing federal political committee. **C**

Name of Employer Chicago Title Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-675**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Leanne Huebner**

Mailing Address 1726 11Th St

City Manhattan Beach State CA Zip Code 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-712**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**John C Hummer**

Mailing Address 1505 Grant St

City Santa Monica State CA Zip Code 90405

FEC ID number of contributing federal political committee. **C**

Name of Employer Fidelity National Title Group Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-687**

Amount of Each Receipt this Period  
 250.00

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

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

850.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anita Jain**

Mailing Address 4249 East Blvd

City Los Angeles State CA Zip Code 90066

FEC ID number of contributing federal political committee. **C**

Name of Employer Anita Jain Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-645**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Bruce P. Jeffer**

Mailing Address 1900 Ave of the Stars 7th Fl

City Los Angeles State CA Zip Code 90067

FEC ID number of contributing federal political committee. **C**

Name of Employer Jeffer Mangels Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-848**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Rachel C Jeffer**

Mailing Address 1414 Via Cresta

City Pacific Palisades State CA Zip Code 90272

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Volunteer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-857**

Amount of Each Receipt this Period  
 500.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Jensvold**

Mailing Address 6325 Topanga Canyon Blvd

City Woodland Hills State CA Zip Code 91367

FEC ID number of contributing federal political committee. **C**

Name of Employer James P Jensvold DDS Occupation Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : 11AI-655**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Roger Jewkes**

Mailing Address 4510 Via Clarice

City Goleta State CA Zip Code 93111

FEC ID number of contributing federal political committee. **C**

Name of Employer Fidelity National Financial Occupation EVP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-765**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim John**

Mailing Address 6348 E Waterton Ave

City Orange State CA Zip Code 92867

FEC ID number of contributing federal political committee. **C**

Name of Employer Fidelity National Financial Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-644**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert K Johnson**

Mailing Address 5729 Spring Oak Dr

City Los Angeles State CA Zip Code 90068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munger, Tolles & Olson LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 11 / 2014

**Transaction ID : 11AI-678**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Laura Jones**

Mailing Address 1 Centre Ct

City Greenville State DE Zip Code 19807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pachulski Stang Ziehl et al Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2014

**Transaction ID : 11AI-945**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Kathryn Jue**

Mailing Address 2552 Via Sanchez

City Palos Verdes Estates State CA Zip Code 90274

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Petillon Hiraide Paralegal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 07 / 2014

**Transaction ID : 11AI-729**

Amount of Each Receipt this Period  
250.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas Kahn**

Mailing Address 1811 Englewood Rd # 324

City Englewood State FL Zip Code 34223

FEC ID number of contributing federal political committee. **C**

Name of Employer none Occupation none

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 04 / 2014

**Transaction ID : 11AI-828-I**

Amount of Each Receipt this Period  
2600.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : 11AI-828-I-MEMO**

Amount of Each Receipt this Period  
2600.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mariko Kahn**

Mailing Address 13080 Mindanao Way

City Marina Del Rey State CA Zip Code 90292

FEC ID number of contributing federal political committee. **C**

Name of Employer Info requested Occupation Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-695**

Amount of Each Receipt this Period  
250.00

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Katz**

Mailing Address 110 E Huntington Dr

City State Zip Code  
Monrovia CA 91016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Modern Health Holdings Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2014

**Transaction ID : 11AI-820**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jim Kay**

Mailing Address 656 Las Alturas Rd

City State Zip Code  
Santa Barbara CA 93103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fidelity National Financial Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : 11AI-746**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Samuel A Keesal**

Mailing Address 400 Oceangate

City State Zip Code  
Long Beach CA 90802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Samuel A Keesal Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 11 / 2014

**Transaction ID : 11AI-669**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kook Jong Kim**

Mailing Address 4151 Forest Hill Dr

City State Zip Code  
La Canada Flintridge CA 91011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
n/a Info

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2014

**Transaction ID : 11AI-850**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Coby King**

Mailing Address 23720 Posey Ln

City State Zip Code  
Canoga Park CA 91304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
High Point Strategies, LLC Public Affairs Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 07 / 2014

**Transaction ID : 11AI-554**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mike King**

Mailing Address 4640 Admiralty Way

City State Zip Code  
Marina Del Rey CA 90292

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mike King Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : 11AI-748**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peter F Klein**

Mailing Address 36510 S Desert Sun Dr

City: Oro Valley State: AZ Zip Code: 85739

FEC ID number of contributing federal political committee: **C**

Name of Employer: Fidelity National Financial Occupation: Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 11 / 2014

**Transaction ID : 11AI-689**

Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Alec S Koo**

Mailing Address 225 Via Alameda

City: Redondo Beach State: CA Zip Code: 90277

FEC ID number of contributing federal political committee: **C**

Name of Employer: Skyline Urology Occupation: Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 04 / 15 / 2014

**Transaction ID : 11AI-588**

Amount of Each Receipt this Period: 1600.00

**C.** Full Name (Last, First, Middle Initial)  
**Alec S Koo**

Mailing Address 225 Via Alameda

City: Redondo Beach State: CA Zip Code: 90277

FEC ID number of contributing federal political committee: **C**

Name of Employer: Skyline Urology Occupation: Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 05 / 14 / 2014

**Transaction ID : 11AI-931**

Amount of Each Receipt this Period: 2600.00

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

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

4450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bing Bonnie Liao**

Mailing Address 504 Bergent St

City State Zip Code  
Lawrenceville NJ 08648

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rose International Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 13 / 2014

**Transaction ID : 11AI-1013-I**

Amount of Each Receipt this Period  
1000.00

Earmarked through Actblue. Date received by conduit in memo record below.

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City State Zip Code  
Somerville MA 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 23 / 2014

**Transaction ID : 11AI-1013-I-MEMO**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Patrick L Lightman**

Mailing Address 21515 Hawthorne Blvd

City State Zip Code  
Torrance CA 90503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Law Offices of Patrick L Lightman Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 11 / 2014

**Transaction ID : 11AI-962-I**

Amount of Each Receipt this Period  
250.00

Earmarked through Lightman, L Patrick Law Office of. Date received by conduit in memo record below.

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

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

1250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lightman, L Patrick Law Office of**

Mailing Address 21515 Hawthorne Blvd

City Torrance State CA Zip Code 90503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : 11AI-962-I-MEMO**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Daqin Liu**

Mailing Address 620 Vale Dr

City Morganville State NJ Zip Code 07751

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AT&T Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-1011-I**

Amount of Each Receipt this Period  
250.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

**C.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11AI-1011-I-MEMO**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeanette F Lam**

Mailing Address 2307 Pennerton Dr

City: Glendale State: CA Zip Code: 91206

FEC ID number of contributing federal political committee: **C**

Name of Employer: na Occupation Info:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 05 / 14 / 2014

**Transaction ID : 11AI-1113**

Amount of Each Receipt this Period: 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas S Lam**

Mailing Address 2307 Pennerton Dr

City: Glendale State: CA Zip Code: 91206

FEC ID number of contributing federal political committee: **C**

Name of Employer: Network Medical Management Occupation: Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 05 / 14 / 2014

**Transaction ID : 11AI-944**

Amount of Each Receipt this Period: 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Larry Layne**

Mailing Address 14800 Rinaldi St

City: Mission Hills State: CA Zip Code: 91345

FEC ID number of contributing federal political committee: **C**

Name of Employer: Nova Development Co Occupation: Businessperson

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 11 / 2014

**Transaction ID : 11AI-638**

Amount of Each Receipt this Period: 250.00

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Lauren Lee</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2014	
Mailing Address 1472 Paseo de Oro		<b>Transaction ID : 11AI-852</b>	
City Pacific Palisades	State CA	Zip Code 90272	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer n/a	Occupation Info		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Pius Lee</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 699 Marina Blvd		<b>Transaction ID : 11AI-760</b>	
City San Francisco	State CA	Zip Code 94123	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer CA Realty & Land Inc.	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Russell Lefevre</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 525 Via La Selva		<b>Transaction ID : 11AI-804</b>	
City Redondo Beach	State CA	Zip Code 90277	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Russell Lefevre	Occupation Engineer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2050.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cary Lerman**

Mailing Address 2917 Gilmeton Ave

City Los Angeles State CA Zip Code 90064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munger Tolles and Olson Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 04 / 2014

**Transaction ID : 11AI-525**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Burton Levinson**

Mailing Address 9401 Wilshire

City Beverly Hills State CA Zip Code 90212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Burton S Levinson, A Professional Corp Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-693**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**William Mark Levinson**

Mailing Address 5463 Amber Cir

City Calabasas State CA Zip Code 91302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fox Rothschild LLC Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-680**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bert Levy**

Mailing Address 707 N Crescent Dr

City State Zip Code  
Beverly Hills CA 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bert Levy Mediator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2014

**Transaction ID : 11AI-751**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**John Lim**

Mailing Address 2913 Via Victoria

City State Zip Code  
Palos Verdes Estates CA 90274

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
John Lim Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2014

**Transaction ID : 11AI-825**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**David Linde**

Mailing Address 722 California Ave

City State Zip Code  
Marina Del Rey CA 90291

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lava Bear Films Producer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2014

**Transaction ID : 11AI-611**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Yin Liu**

Mailing Address 3220 Grosbeak Ct

City State Zip Code  
Davis CA 95616

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mary Yin Liu Businessperson

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-895**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Peter Liu**

Mailing Address 58 Winding

City State Zip Code  
Irvine CA 92620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PacRim Engineering Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 13 / 2014

**Transaction ID : 11AI-579**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Xiangqun Liu**

Mailing Address 273 Del Monte Ave

City State Zip Code  
Los Altos CA 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Dropbox Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.88

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 03 / 2014

**Transaction ID : 11AI-506**

Amount of Each Receipt this Period  
200.88

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

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

2200.88

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Xiangqun Liu**

Mailing Address 273 Del Monte Ave

City Los Altos State CA Zip Code 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer Dropbox Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**225.88**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 14 / 2014**

**Transaction ID : 11AI-593**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**OMalley Miller**

Mailing Address 1300 Wentworth Ave

City Pasadena State CA Zip Code 91106

FEC ID number of contributing federal political committee. **C**

Name of Employer OMalley Miller Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 27 / 2014**

**Transaction ID : 11AI-734-I**

Amount of Each Receipt this Period  
**500.00**

Earmarked through Actblue. Date received by conduit in memo record below.

**C.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**180079.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 07 / 2014**

**Transaction ID : 11AI-734-I-MEMO**

Amount of Each Receipt this Period  
**500.00**

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

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

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

**525.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Allan Mackenzie**

Mailing Address 3252 Front St

City San Diego State CA Zip Code 92103

FEC ID number of contributing federal political committee. **C**

Name of Employer Allan Mackenzie Occupation Real Estate Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : 11AI-504**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Ray Marine**

Mailing Address 1245 Lions Peak Ln

City San Martin State CA Zip Code 95046

FEC ID number of contributing federal political committee. **C**

Name of Employer Fidelity National Financial Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-745**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Linda Marsh**

Mailing Address 465 Harvard Dr

City Arcadia State CA Zip Code 91007

FEC ID number of contributing federal political committee. **C**

Name of Employer AHMC Health Occupation CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-940**

Amount of Each Receipt this Period  
 2000.00

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

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

5100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul Martin**

Mailing Address 4640 Admiralty Way

City Marina Del Rey State CA Zip Code 90292

FEC ID number of contributing federal political committee. **C**

Name of Employer Paul Martin Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-743**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Carl Middleton**

Mailing Address 3 Daybreak

City Irvine State CA Zip Code 92614

FEC ID number of contributing federal political committee. **C**

Name of Employer Real Estate Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : 11AI-742**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Howard Moon**

Mailing Address 2708 George Mason Pl

City Alexandria State VA Zip Code 22305

FEC ID number of contributing federal political committee. **C**

Name of Employer Amgen Occupation Gov't Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : 11AI-808**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carlos Moreno**

Mailing Address 1007 Glen Arbor Ave

City Los Angeles State CA Zip Code 90041

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-910**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Patric Mortimer**

Mailing Address 76 Sandpiper Ln

City Laguna Beach State CA Zip Code 92656

FEC ID number of contributing federal political committee. **C**

Name of Employer Fidelity National Title Group, Inc Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-773**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Murphy**

Mailing Address 1763 Stone Canyon Rd

City Los Angeles State CA Zip Code 90077

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-643**

Amount of Each Receipt this Period  
 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edna Murphy**

Mailing Address 567 36th St

City State Zip Code  
Manhattan Beach CA 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
UCLA Medical Center Health Information Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2014

**Transaction ID : 11AI-860**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Nash**

Mailing Address 5205 Ocean Front Walk

City State Zip Code  
Marina Del Rey CA 90292

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munger, Tolles & Olson Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 02 / 2014

**Transaction ID : 11AI-625-I**

Amount of Each Receipt this Period  
250.00

Earmarked through Actblue. Date received by conduit in memo record below.

**C.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City State Zip Code  
Somerville MA 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 25 / 2014

**Transaction ID : 11AI-625-I-MEMO**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy A. Neill**

Mailing Address 25852 McBean Pkwy # 507

City Santa Clarita State CA Zip Code 91355

FEC ID number of contributing federal political committee. **C**

Name of Employer Valley Radiotherapy Associates Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-867**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Dancy L Nelson**

Mailing Address 2415 Silverstrand Ave

City Hermosa Beach State CA Zip Code 90254

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-873**

Amount of Each Receipt this Period  
125.00

**C.** Full Name (Last, First, Middle Initial)  
**Alice P. Neuhauser**

Mailing Address 1466 11th St

City Manhattan Beach State CA Zip Code 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Kushner Locke Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-816**

Amount of Each Receipt this Period  
2600.00

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

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

2975.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 61 OF 141

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Minh Nguyen**

Mailing Address 4226 Locust Ave

City State Zip Code  
 Long Beach CA 90807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 The Law Office of Minh T. Nguyen Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 19 / 2014

**Transaction ID : 11AI-614**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ronald L. Olson**

Mailing Address 355 S Grand Ave

City State Zip Code  
 Los Angeles CA 90071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Ronald L Olson Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-768**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael K Ong**

Mailing Address 2305 24th St

City State Zip Code  
 Santa Monica CA 90405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 UCLA Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-770**

Amount of Each Receipt this Period  
 300.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David M Parker**

Mailing Address 1230 Columbia St

City San Diego State CA Zip Code 92101

FEC ID number of contributing federal political committee. **C**

Name of Employer Andersen Hilbert & Parker LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-965-I**

Amount of Each Receipt this Period  
250.00

Earmarked through Andersen Hilbert & Parker LLP. Date received by conduit in memo record below.

**B.** Full Name (Last, First, Middle Initial)  
**Andersen Hilbert & Parker LLP**

Mailing Address 1230 Columbia St

City San Diego State CA Zip Code 92101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-965-I-MEMO**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Dana A. Pachulski**

Mailing Address 100 Copa de Oro Rd

City Los Angeles State CA Zip Code 90077

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Volunteer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-937**

Amount of Each Receipt this Period  
2600.00

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dana A. Pachulski**

Mailing Address 100 Copa de Oro Rd

City Los Angeles State CA Zip Code 90077

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Volunteer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-938**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard M. Pachulski**

Mailing Address 10100 Santa Monica Blvd

City Los Angeles State CA Zip Code 90067

FEC ID number of contributing federal political committee. **C**

Name of Employer Pachulski Crane Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-935**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard M. Pachulski**

Mailing Address 10100 Santa Monica Blvd

City Los Angeles State CA Zip Code 90067

FEC ID number of contributing federal political committee. **C**

Name of Employer Pachulski Crane Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-936**

Amount of Each Receipt this Period  
2200.00

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

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

7400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jenny Pao**

Mailing Address 67 Orchard Hills St

City Atherton State CA Zip Code 94027

FEC ID number of contributing federal political committee. **C**

Name of Employer Jenny Pao Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-668**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Royal S Park**

Mailing Address 4017 Via Solano

City Palos Verdes Estates State CA Zip Code 90274

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Info requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-893**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Davidson Pattiz**

Mailing Address 29136 Craggs Dr

City Agoura Hills State CA Zip Code 91301

FEC ID number of contributing federal political committee. **C**

Name of Employer Zenith Insurance Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11AI-791**

Amount of Each Receipt this Period  
 100.00

Amount of Each Receipt this Period  
 600.00

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

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

2100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steve Perry**

Mailing Address 535 N Brano Ave

City: Glendale State: CA Zip Code: 91203

FEC ID number of contributing federal political committee: **C**

Name of Employer: Chicago Title Occupation: Title Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 11 / 2014

**Transaction ID : 11AI-690**

Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Carl Powell**

Mailing Address 519 Rockport Ct

City: Encinitas State: CA Zip Code: 92024

FEC ID number of contributing federal political committee: **C**

Name of Employer: Carl Powel Occupation: Cosmetic Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 04 / 11 / 2014

**Transaction ID : 11AI-642**

Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Joe A Reinhardt III**

Mailing Address 1056 W Dorchester Dr

City: Jacksonville State: FL Zip Code: 32259

FEC ID number of contributing federal political committee: **C**

Name of Employer: Fidelity National Financial Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 11 / 2014

**Transaction ID : 11AI-688**

Amount of Each Receipt this Period: 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Benjamin Reznick**

Mailing Address 4659 Balboa Ave

City Encino State CA Zip Code 91316

FEC ID number of contributing federal political committee. **C**

Name of Employer Jeffer Mangels Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-853**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Kathy Riordan**

Mailing Address Info requested

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Info requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-635**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Felicia Rosenfeld**

Mailing Address 722 California Ave

City Marina Del Rey State CA Zip Code 90291

FEC ID number of contributing federal political committee. **C**

Name of Employer Pentacle Occupation Arts Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2014

**Transaction ID : 11AI-610**

Amount of Each Receipt this Period  
 1000.00

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alan G Ross**

Mailing Address 3151 Airway Ave

City State Zip Code  
Costa Mesa CA 92626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Alan G Ross Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-747**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**David M Roth**

Mailing Address 539 Middle Dr

City State Zip Code  
Delray Beach FL 33483

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
David Roth Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-756**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**William Rouse**

Mailing Address 2129 W Rosecrans Ave

City State Zip Code  
Gardena CA 90249

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Law Office of William Rouse Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : 11AI-805**

Amount of Each Receipt this Period  
500.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nicholas Roxborough**

Mailing Address 5820 Canoga Ave

City Woodland Hills State CA Zip Code 91367

FEC ID number of contributing federal political committee. **C**

Name of Employer RPNA Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 21 / 2014

**Transaction ID : 11AI-615**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Peter Sadowski**

Mailing Address 1401 Riverplace Blvd

City Jacksonville State FL Zip Code 32207

FEC ID number of contributing federal political committee. **C**

Name of Employer Peter Sadowski Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-665**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Lisa A. Safa**

Mailing Address 441 29th St

City Manhattan Beach State CA Zip Code 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer UCLA Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-861**

Amount of Each Receipt this Period  
 500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roger G Schamp**

Mailing Address 5587 Mistridge Dr

City Palos Verdes Estates State CA Zip Code 90275

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-764**

Amount of Each Receipt this Period  
 500.00

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Roger G Schamp**

Mailing Address 5587 Mistridge Dr

City Palos Verdes Estates State CA Zip Code 90275

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-901**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**John Schoen**

Mailing Address 501 Esplanade

City Redondo Beach State CA Zip Code 90277

FEC ID number of contributing federal political committee. **C**

Name of Employer Advertising and Marketing Network Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-752**

Amount of Each Receipt this Period  
 200.00

Amount of Each Receipt this Period  
 450.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alan M. Schwartz**

Mailing Address 1311 Sartori # 11

City Torrance State CA Zip Code 90501

FEC ID number of contributing federal political committee. **C**

Name of Employer AMS Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-823**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Sharkey**

Mailing Address 102 Montreal

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-912**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Margot V. Shekhter**

Mailing Address 2156 Stratford Cir

City Los Angeles State CA Zip Code 90077

FEC ID number of contributing federal political committee. **C**

Name of Employer NMS Properties Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-849**

Amount of Each Receipt this Period  
 2600.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alfred Sidhom**

Mailing Address 8702 Los Coyotes

City Buena Park State CA Zip Code 90621

FEC ID number of contributing federal political committee. **C**

Name of Employer Alfred Sidhom Occupation Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-905**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth T Sim**

Mailing Address 2822 Wagon Train Ln

City Diamond Bar State CA Zip Code 91765

FEC ID number of contributing federal political committee. **C**

Name of Employer Advance Surgeries Medical Group Occupation Medical Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-941**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Simone S Sim**

Mailing Address 2822 Wagon Train Ln

City Diamond Bar State CA Zip Code 91765

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-1112**

Amount of Each Receipt this Period  
 2400.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Simon**

Mailing Address 10490 Santa Monica Blvd

City Los Angeles State CA Zip Code 90025

FEC ID number of contributing federal political committee. **C**

Name of Employer The Simon Law Group Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 26 / 2014

**Transaction ID : 11AI-652**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**George So**

Mailing Address 1817 Elm Ave

City Manhattan Beach State CA Zip Code 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer George So Professional Corp. Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-818**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Steve Soboroff**

Mailing Address 1101 Montana Ave # A

City Santa Monica State CA Zip Code 90403

FEC ID number of contributing federal political committee. **C**

Name of Employer Steve Soboroff Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-858**

Amount of Each Receipt this Period  
 500.00

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marc Sorini**

Mailing Address 706 Smallwood Rd

City State Zip Code  
Rockville MD 20850

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Marc Sorini Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-697**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Marc Sorini**

Mailing Address 706 Smallwood Rd

City State Zip Code  
Rockville MD 20850

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Marc Sorini Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-939**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ray Sotero**

Mailing Address 2104 Edith St

City State Zip Code  
Sacramento CA 95864

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CA State Senate Communications Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-809**

Amount of Each Receipt this Period  
250.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 141	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Spiegel**

Mailing Address 355 S Grand Ave

City Los Angeles State CA Zip Code 90071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munger, Tolles & Olson LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 03 / 2014

**Transaction ID : 11AI-399**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Corky Hale Stoller**

Mailing Address 9100 Oriole Way

City Los Angeles State CA Zip Code 90069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Corky Hale Stoller Businessperson

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2014

**Transaction ID : 11AI-899**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Constance Sullivan**

Mailing Address 932 Via Nogales

City Palos Verdes Estates State CA Zip Code 90274

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
n/a Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2050.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 15 / 2014

**Transaction ID : 11AI-608**

Amount of Each Receipt this Period  
1050.00

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

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

2550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Constance Sullivan**

Mailing Address 932 Via Nogales

City Palos Verdes Estates State CA Zip Code 90274

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2050.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : 11AI-726**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Sullivan**

Mailing Address 932 Via Nogales

City Palos Verdes Estates State CA Zip Code 90274

FEC ID number of contributing federal political committee. **C**

Name of Employer Bay Cities Pet Hospital Occupation Veterinarian

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-817**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kanji Takahashi**

Mailing Address 342 Hauser Blvd

City Los Angeles State CA Zip Code 90036

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 03 / 2014

**Transaction ID : 11AI-624-I**

Amount of Each Receipt this Period  
250.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11AI-624-I-MEMO**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Forest Tan**

Mailing Address 6720 Ridgecliff

City Cleveland State OH Zip Code 44139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cleveland State University Education

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2014

**Transaction ID : 11AI-629-I**

Amount of Each Receipt this Period  
100.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

**C.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11AI-629-I-MEMO**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Forest Tan**

Mailing Address 6720 Ridgecliff

City Cleveland State OH Zip Code 44139

FEC ID number of contributing federal political committee. **C**

Name of Employer Cleveland State University Occupation Education

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2014

**Transaction ID : 11AI-1007-I**

Amount of Each Receipt this Period  
 100.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **180079.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11AI-1007-I-MEMO**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**  
 Total earmarked through conduit, PAC limits not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Patricia Torrey**

Mailing Address 15332 Antioch St

City Pacific Palisades State CA Zip Code 90272

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : 11AI-733-I**

Amount of Each Receipt this Period  
 1000.00

Earmarked through Actblue. Date recieved by conduit in memo record below.

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 78 OF 141  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : 11AI-733-I-MEMO**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**B.** Full Name (Last, First, Middle Initial)  
**John Tallichet**

Mailing Address 907 Bellis St

City Newport Beach State CA Zip Code 92660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Specialty Restaurants Corporation Restaurant Orotator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2014

**Transaction ID : 11AI-613**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ardie Tavangarian**

Mailing Address 1176 Tellem Dr

City Pacific Palisades State CA Zip Code 90272

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Arya Group President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-859**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 79 OF 141  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anna W. Tenenblatt**

Mailing Address 608 N Beverly Dr

City State Zip Code  
Beverly Hills CA 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Antex Knitting Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-851**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Victoria J Tsong**

Mailing Address 107 N Swall Dr

City State Zip Code  
Los Angeles CA 90048

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Victoria J Tsong Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-766**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Uhl**

Mailing Address 2119 Sunset Crest Dr

City State Zip Code  
Los Angeles CA 90046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Robert Uhl Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11AI-753**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gary R Urquhart**

Mailing Address 8220 Merganser Dr

City State Zip Code  
Ponte Vedra Beach FL 32082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fidelity National Financial Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 11 / 2014

**Transaction ID : 11AI-686**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Halen Vaezi**

Mailing Address 1349 Via Coronel

City State Zip Code  
Palos Verdes Estates CA 90274

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
n/a Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2014

**Transaction ID : 11AI-904**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Viejas Tribal Government**

Mailing Address 1 Viejas Grade Rd

City State Zip Code  
Alpine CA 91901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4800.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 29 / 2014

**Transaction ID : 11AI-727**

Amount of Each Receipt this Period  
2600.00

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

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

3350.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Viejas Tribal Government**

Mailing Address 1 Viejas Grade Rd

City Alpine State CA Zip Code 91901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4800.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 29 / 2014

**Transaction ID : 11AI-728**

Amount of Each Receipt this Period  
2200.00

**B.** Full Name (Last, First, Middle Initial)  
**Abraham Wacht**

Mailing Address 310 18th St

City Santa Monica State CA Zip Code 90402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
n/a Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2014

**Transaction ID : 11AI-863**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Henry Weissmann**

Mailing Address 355 S grand Ave

City Los Angeles State CA Zip Code 90071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Munger Tolles Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 07 / 2014

**Transaction ID : 11AI-553**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bruce A Wessel**

Mailing Address 353 19th St

City Santa Monica State CA Zip Code 90402

FEC ID number of contributing federal political committee. **C**

Name of Employer Bruce A Wessel Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-664**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**William A. Wieninger Jr.**

Mailing Address 3731 Kanaina Ave

City Honolulu State HI Zip Code 96815

FEC ID number of contributing federal political committee. **C**

Name of Employer US Dept of Defense Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-868**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Fredrick N. Wolk**

Mailing Address 606 Esplande Ave

City Redondo Beach State CA Zip Code 90277

FEC ID number of contributing federal political committee. **C**

Name of Employer Fredrick N Wolk Occupation M.D.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-903**

Amount of Each Receipt this Period  
 750.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>Alan Wong</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 2142 Owl Meadow		<b>Transaction ID : 11AI-911</b>
City Folsom	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Alan Wong	Occupation Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Margaret W Wong</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 3150 Chester Ave		<b>Transaction ID : 11AI-774</b>
City Cleveland	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Margaret Wong	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>Margaret W Wong</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 3150 Chester Ave		<b>Transaction ID : 11AI-922</b>
City Cleveland	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Margaret Wong	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Wong**

Mailing Address 4513 Euclid Ave

City Sacramento State CA Zip Code 95822

FEC ID number of contributing federal political committee. **C**

Name of Employer Bill Wong LLC Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : 11AI-656**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**William A Wright**

Mailing Address 2470 Coldwater Canyon Dr

City Beverly Hills State CA Zip Code 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer William A Wright Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-691**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Sophia Yen**

Mailing Address 411 Los Ninos Way

City Los Altos State CA Zip Code 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer Sophia Yen Occupation Pediatrician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.88

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2014

**Transaction ID : 11AI-730-I**

Amount of Each Receipt this Period  
500.88

Earmarked through Actblue. Date recieved by conduit in memo record below.

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

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

1000.88

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
180079.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : 11AI-730-I-MEMO**

Amount of Each Receipt this Period  
500.88

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Jack Yeh**

Mailing Address 11355 W Olympic Blvd

City Los Angeles State CA Zip Code 90064

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Manatt, Phepls & Phillips Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 04 / 2014

**Transaction ID : 11AI-522**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Regina Yin**

Mailing Address 6319 Pleasants Valley Rd

City Vacaville State CA Zip Code 95688

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Regina Yin Businessperson

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-898**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lily F Ying**

Mailing Address 6677 Renwood Rd

City Cleveland State OH Zip Code 44131

FEC ID number of contributing federal political committee. **C**

Name of Employer Lily F Ying Occupation Notary Public

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11AI-676**

Amount of Each Receipt this Period  
 666.00

**B.** Full Name (Last, First, Middle Initial)  
**Hagop Youredjian**

Mailing Address 4365 Forman Ave

City Burbank State CA Zip Code 91502

FEC ID number of contributing federal political committee. **C**

Name of Employer Western Drug Occupation Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-821**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Yanda Zhang**

Mailing Address 9847 W Taron Dr

City Elk Grove State CA Zip Code 95757

FEC ID number of contributing federal political committee. **C**

Name of Employer TRC Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11AI-909**

Amount of Each Receipt this Period  
 300.00

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

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

3566.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 141
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Linwu Limited Partnership**

Mailing Address 21468 Continental Cir

City State Zip Code  
Saratoga CA 95070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 11 / 2014

**Transaction ID : 11AI-482-P**

Amount of Each Receipt this Period  
2600.00

See attribution below.

**B.** Full Name (Last, First, Middle Initial)  
**Jill Lin**

Mailing Address 21468 Continental Cir

City State Zip Code  
Saratoga CA 95070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Acorn Campus Ventura Capital

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 11 / 2014

**Transaction ID : 11AI-662-PA**

Amount of Each Receipt this Period  
2600.00

**[MEMO ITEM]**  
Partnership Attribution

**C.** Full Name (Last, First, Middle Initial)  
**Bibliotopus**

Mailing Address 2132 Century Park Ln # 315

City State Zip Code  
Los Angeles CA 90067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 09 / 2014

**Transaction ID : 11AI-650-P**

Amount of Each Receipt this Period  
2600.00

See attribution below.

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

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

5200.00

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

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

FOR LINE NUMBER: PAGE 88 OF 141  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Hime**

Mailing Address 2132 Century Park Ln

City Los Angeles State CA Zip Code 90067

FEC ID number of contributing federal political committee. **C**

Name of Employer: Biblioctopus Occupation: Bookseller

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11AI-847-PA**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

**[MEMO ITEM]**  
Partnership Attribution

**B.** Full Name (Last, First, Middle Initial)

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)

Election Cycle-to-Date  
 \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period  
 \_\_\_\_\_

**C.** Full Name (Last, First, Middle Initial)

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)

Election Cycle-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).....

\_\_\_\_\_ 0.00

\_\_\_\_\_ 212660.76



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 141
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A. AVMA Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1910 Sunderland Pl  
 City Los Angeles State CA Zip Code 90048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 04 / 2014  
**Transaction ID : 11C-562**  
 Amount of Each Receipt this Period  
 1000.00

**B. Allergan Inc. PAC for Employees Edith Bennett, Treasurer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2148 E Orange View  
 City Orange State CA Zip Code 92867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014  
**Transaction ID : 11C-759**  
 Amount of Each Receipt this Period  
 1000.00

**C. American Dental PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111-14Th St  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014  
**Transaction ID : 11C-758**  
 Amount of Each Receipt this Period  
 2500.00

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 141
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Society of Anesthesiologists PAC**

Mailing Address 520 N Northwest Highway

City Park Ridge State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11C-843**

Amount of Each Receipt this Period  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**Asian American Action Fund**

Mailing Address 30360 St NW BSMT

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11C-663**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Business Industry Political Action Committee**

Mailing Address 888 16Th S

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11C-737**

Amount of Each Receipt this Period  
 1000.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 141
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CA Radiological PAC (CAL RAD PAC)**

Mailing Address 1127 11th ST. #300

City Sacramento	State CA	Zip Code 95814
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 09 / 2014

**Transaction ID : 11C-622**

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CAPAC Leadership PAC**

Mailing Address 1126 16th St

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11C-661**

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
**CWA COPE PCC**

Mailing Address 501 3rd St

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11C-812**

Amount of Each Receipt this Period

2500.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 141
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A. Full Name (Last, First, Middle Initial)**  
**Carpenters's Legislative Improvement Committee**

Mailing Address 101 Consultitution Ave

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11C-659**

Amount of Each Receipt this Period  
 5000.00

**B. Full Name (Last, First, Middle Initial)**  
**Employees of Northrop Grumman Corporation PAC (ENGPAC)**

Mailing Address 2980 Fairview Park Dr

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11C-814**

Amount of Each Receipt this Period  
 5000.00

**C. Full Name (Last, First, Middle Initial)**  
**Fidelity National Financial PAC 2001**

Mailing Address 4050 Calle Real

City Goleta State CA Zip Code 93110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11C-660**

Amount of Each Receipt this Period  
 5000.00

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

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

15000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 141
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Hall for Congress Exploratory Committee**

Mailing Address 3700 Wilshire Blvd

City Los Angeles State CA Zip Code 90010

FEC ID number of contributing federal political committee. **C** C00497859

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11C-900**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**IBEW PAC Voluntary Fund**

Mailing Address 900 Seventh St

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11C-781**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Inland Empire Strikes PAC**

Mailing Address Info requested

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11C-896**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 141
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A. McKesson Corporation Employees Political Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address One Post St

City San Francisco State CA Zip Code 94104

FEC ID number of contributing federal political committee. **C** C00108035

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11C-889**

Amount of Each Receipt this Period  
 2500.00

**B. Oral & Maxillofacial Surgery PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 9700 W Bryn Mawr Ave

City Des Plaines State IL Zip Code 60018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11C-844**

Amount of Each Receipt this Period  
 1500.00

**C. Pacific Palisades Democratic Club**

Full Name (Last, First, Middle Initial)  
Mailing Address Info requested

City State Zip Code

FEC ID number of contributing federal political committee. **C** C00404301

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11C-916**

Amount of Each Receipt this Period  
 200.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 141
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Palos Verdes Democrats**

Mailing Address PO Box 2234

City Palos Verdes Estates State CA Zip Code 90274

FEC ID number of contributing federal political committee. **C** C00528984

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : 11C-846**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Political Action Committee of the AAOS**

Mailing Address 317 Massachussets Ave

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : 11C-666**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Votevets**

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00418897

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 11C-998**

Amount of Each Receipt this Period  
 5000.00

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

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

7500.00

55200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 141			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2014</b>
Mailing Address <b>366 Summer St</b>		Amount of Each Disbursement this Period <b>33.59</b>
City <b>Somerville</b>	State <b>MA</b>	Zip Code <b>02144</b>
Purpose of Disbursement <b>Cr.Card Processing Fee</b>	Category/Type <b>001</b>	
Candidate Name <b>Actblue</b>	Transaction ID : <b>17-194</b>	
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>B. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 13 / 2014</b>
Mailing Address <b>366 Summer St</b>		Amount of Each Disbursement this Period <b>65.68</b>
City <b>Somerville</b>	State <b>MA</b>	Zip Code <b>02144</b>
Purpose of Disbursement <b>Cr.Card Processing Fee</b>	Category/Type <b>001</b>	
Candidate Name <b>Actblue</b>	Transaction ID : <b>17-195</b>	
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>c. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 20 / 2014</b>
Mailing Address <b>366 Summer St</b>		Amount of Each Disbursement this Period <b>20.78</b>
City <b>Somerville</b>	State <b>MA</b>	Zip Code <b>02144</b>
Purpose of Disbursement <b>Cr.Card Processing Fee</b>	Category/Type <b>001</b>	
Candidate Name <b>Actblue</b>	Transaction ID : <b>17-196</b>	
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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>120.05</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 141			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 73.08
City Somerville State MA Zip Code 02144	Purpose of Disbursement Cr.Card Processing Fee	
Candidate Name <b>Actblue</b>	Category/Type 001	<b>Transaction ID : 17-197</b>
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>B. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 0.00
City Somerville State MA Zip Code 02144	Purpose of Disbursement Credit Card Merchant Fee	
Candidate Name <b>Actblue</b>	Category/Type 003	<b>Transaction ID : 17-153</b>
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>c. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 84.93
City Somerville State MA Zip Code 02144	Purpose of Disbursement Cr.Card Processing Fee	
Candidate Name <b>Actblue</b>	Category/Type 001	<b>Transaction ID : 17-155</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	158.01
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 141			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : 17-156</b>
City Somerville	State MA	
Zip Code 02144	Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 003
Candidate Name <b>Actblue</b>	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>B. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 84.47 <b>Transaction ID : 17-157</b>
City Somerville	State MA	
Zip Code 02144	Purpose of Disbursement Cr.Card Processing Fee	Category/ Type 001
Candidate Name <b>Actblue</b>	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>c. Actblue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 58.71 <b>Transaction ID : 17-372</b>
City Somerville	State MA	
Zip Code 02144	Purpose of Disbursement Cr.Card Processing Fee	Category/ Type 001
Candidate Name <b>Actblue</b>	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	143.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 141			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Arjay Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 822 Montgomery Ave.		Amount of Each Disbursement this Period 2500.00
City Narberth State PA Zip Code 19072	Purpose of Disbursement Deposit on Rental	
Candidate Name	Category/Type 001	<b>Transaction ID : 17-24</b>
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>B. Arjay Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 822 Montgomery Ave.		Amount of Each Disbursement this Period 3650.00
City Narberth State PA Zip Code 19072	Purpose of Disbursement Rent	
Candidate Name	Category/Type 001	<b>Transaction ID : 17-25</b>
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>C. Automatic Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 1621 Cabrillo Ave.		Amount of Each Disbursement this Period 119.90
City Torrance State CA Zip Code 90501	Purpose of Disbursement Walk Sheets	
Candidate Name	Category/Type 005	<b>Transaction ID : 17-110</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6269.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Andre Berger</b>		Date of Disbursement MM / DD / YYYY 05 / 04 / 2014
Mailing Address 333 S Oakhurst Dr		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 17-154</b>
City Beverly Hills	State CA	
Zip Code 90212	Purpose of Disbursement Refund of Contribution	Category/ Type 001
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) <b>B. Robert Bermond</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2014
Mailing Address 917 S. Marjan St.		Amount of Each Disbursement this Period 180.00 <b>Transaction ID : 17-100</b>
City Anaheim	State CA	
Zip Code 92806	Purpose of Disbursement Salary - 4/15-4/25/14	Category/ Type 001
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) <b>c. Robert Bermond</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 917 S. Marjan St.		Amount of Each Disbursement this Period 660.00 <b>Transaction ID : 17-116</b>
City Anaheim	State CA	
Zip Code 92806	Purpose of Disbursement Salary	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1840.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 141			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Buchert Development LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1600 Redondo Ave., #4		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : 17-28</b>
City Long Beach	State CA	
Zip Code 90804	Purpose of Disbursement Fundraising Management Fee	Category/ Type 001
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) <b>B. Buchert Development LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 1600 Redondo Ave., #4		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : 17-102</b>
City Long Beach	State CA	
Zip Code 90804	Purpose of Disbursement Fundraising Management Fee	Category/ Type 001
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) <b>c. Buchert Development LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 1600 Redondo Ave., #4		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : 17-151</b>
City Long Beach	State CA	
Zip Code 90804	Purpose of Disbursement Fundraising Management Fee	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 141			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Genelle Buchert</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2014</b>
Mailing Address 1600 Redondo Ave., #4		Amount of Each Disbursement this Period <b>930.35</b>
City Long Beach	State CA	
Zip Code 90804	Purpose of Disbursement Shipping, Postage, Event Costs	<b>Transaction ID : 17-27</b>
Candidate Name	<b>001</b> 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:		

Full Name (Last, First, Middle Initial) <b>B. Genelle Buchert</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 08 / 2014</b>
Mailing Address 1600 Redondo Ave., #4		Amount of Each Disbursement this Period <b>1282.82</b>
City Long Beach	State CA	
Zip Code 90804	Purpose of Disbursement Postage, parking, copies, shipping, supplies	<b>Transaction ID : 17-149</b>
Candidate Name	<b>003</b> 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:		

Full Name (Last, First, Middle Initial) <b>c. Carrick Consulting Media Account</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 09 / 2014</b>
Mailing Address 2866 Belden Dr.		Amount of Each Disbursement this Period <b>110000.00</b>
City Los Angeles	State CA	
Zip Code 90068	Purpose of Disbursement Media Buy	<b>Transaction ID : 17-150</b>
Candidate Name	<b>004</b> 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>112213.17</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Carrick Consulting Media Account</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 14 / 2014</b>
Mailing Address <b>2866 Belden Dr.</b>		Amount of Each Disbursement this Period <b>112500.00</b>
City <b>Los Angeles</b>	State <b>CA</b>	
Zip Code <b>90068</b>	Purpose of Disbursement <b>Media Buy</b>	<b>Transaction ID : 17-152</b>
Candidate Name	<b>004</b> 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:		

Full Name (Last, First, Middle Initial) <b>B. The Jewish Journal</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address <b>3250 Wilshire Blvd., #1250</b>		Amount of Each Disbursement this Period <b>720.00</b>
City <b>Los Angeles</b>	State <b>CA</b>	
Zip Code <b>90010</b>	Purpose of Disbursement <b>Ad</b>	<b>Transaction ID : 17-47-S</b>
Candidate Name	<b>004</b> 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)	<b>[MEMO ITEM]</b> SUBVENDOR to Bill Carrick
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Bill Carrick</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address <b>2866 Belden Dr.</b>		Amount of Each Disbursement this Period <b>720.00</b>
City <b>Los Angeles</b>	State <b>CA</b>	
Zip Code <b>90068</b>	Purpose of Disbursement <b>Ad</b>	<b>Transaction ID : 17-46</b>
Candidate Name	<b>004</b> 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>113220.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 141			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Bill Carrick</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 2866 Belden Dr.		Amount of Each Disbursement this Period 300.00
City Los Angeles	State CA	
Zip Code 90068	Purpose of Disbursement Ad	<b>Transaction ID : 17-140</b>
Candidate Name	004 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:		

Full Name (Last, First, Middle Initial) <b>B. The Jewish Journal</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 3250 Wilshire Blvd., #1250		Amount of Each Disbursement this Period 300.00
City Los Angeles	State CA	
Zip Code 90010	Purpose of Disbursement Ad	<b>Transaction ID : 17-141-S</b>
Candidate Name	004 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:		
		<b>[MEMO ITEM]</b> SUBVENDOR to Bill Carrick

Full Name (Last, First, Middle Initial) <b>c. Daniel C. Weitzman Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1100 O Street, #200		Amount of Each Disbursement this Period 2000.00
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Fundraising Management Fee	<b>Transaction ID : 17-26</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2300.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 141			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Daniel C. Weitzman Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 07 / 2014</b>
Mailing Address 1100 O Street, #200		Amount of Each Disbursement this Period <b>1000.00</b>
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Fundraising Management Fee	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : 17-143</b>
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>B. Dolling Insurance Agency</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 07 / 2014</b>
Mailing Address P.O. Box 399		Amount of Each Disbursement this Period <b>1867.48</b>
City Red Bluff State CA Zip Code 96080	Purpose of Disbursement Insurance	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : 17-139</b>
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>c. Ana Espinoza</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 18 / 2014</b>
Mailing Address 1035 W.225th St.		Amount of Each Disbursement this Period <b>180.00</b>
City Torrance State CA Zip Code 90502	Purpose of Disbursement Salary - 4/15-4/25/14	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : 17-92</b>
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3047.48</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 141			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Ana Espinoza</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1035 W.225th St.		Amount of Each Disbursement this Period 660.00
City Torrance	State CA	
Zip Code 90502	Purpose of Disbursement Salary	<b>Transaction ID : 17-123</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>B. Fiorello Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 3914 Barcroft Mews Ct.		Amount of Each Disbursement this Period 5090.00
City Falls Church	State VA	
Zip Code 22041	Purpose of Disbursement Retainer Fees	<b>Transaction ID : 17-44</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>c. First Republic Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 888 S Figueroa St		Amount of Each Disbursement this Period 1405.72
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Cr.Card Processing Fee-Democracy Engine	<b>Transaction ID : 17-198</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7155.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. First Republic Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 888 S Figueroa St			Amount of Each Disbursement this Period 594.93	
City Los Angeles	State CA	Zip Code 90017	Transaction ID : 17-199	
Purpose of Disbursement Cr.Card Processing Fee		001 Category/ Type		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>B. First Republic Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014	
Mailing Address 888 S Figueroa St			Amount of Each Disbursement this Period 845.40	
City Los Angeles	State CA	Zip Code 90017	Transaction ID : 17-375	
Purpose of Disbursement Cr.Card Processing Fee		001 Category/ Type		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>c. First Republic Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014	
Mailing Address 888 S Figueroa St			Amount of Each Disbursement this Period 608.10	
City Los Angeles	State CA	Zip Code 90017	Transaction ID : 17-376	
Purpose of Disbursement Cr.Card Processing Fee		001 Category/ Type		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2048.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 141			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. First Republic Bank</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 23 / 2014</b>
Mailing Address <b>888 S Figueroa St</b>		Amount of Each Disbursement this Period <b>241.42</b> <b>Transaction ID : 17-377</b>
City <b>Los Angeles</b>	State <b>CA</b>	
Zip Code <b>90017</b>	Purpose of Disbursement <b>Cr.Card Processing Fee</b>	Category/ Type <b>001</b>
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) <b>B. First Republic Bank</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 30 / 2014</b>
Mailing Address <b>888 S Figueroa St</b>		Amount of Each Disbursement this Period <b>116.15</b> <b>Transaction ID : 17-378</b>
City <b>Los Angeles</b>	State <b>CA</b>	
Zip Code <b>90017</b>	Purpose of Disbursement <b>Cr.Card Processing Fee</b>	Category/ Type <b>001</b>
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) <b>c. First Republic Bank</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 05 / 2014</b>
Mailing Address <b>888 S Figueroa St</b>		Amount of Each Disbursement this Period <b>1284.01</b> <b>Transaction ID : 17-379</b>
City <b>Los Angeles</b>	State <b>CA</b>	
Zip Code <b>90017</b>	Purpose of Disbursement <b>Cr.Card Processing Fee</b>	Category/ Type <b>001</b>
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1641.58</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. First Republic Bank</b>		Date of Disbursement MM / DD / YYYY 05 / 08 / 2014
Mailing Address 888 S Figueroa St		Amount of Each Disbursement this Period 213.86 <b>Transaction ID : 17-380</b>
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Cr.Card Processing Fee	Category/ Type 001
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) <b>B. First Republic Bank</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 888 S Figueroa St		Amount of Each Disbursement this Period 98.82 <b>Transaction ID : 17-381</b>
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Cr.Card Processing Fee	Category/ Type 001
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) <b>c. Jeffrey R Gozzo</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2014
Mailing Address 3301 North Park Dr., #3315		Amount of Each Disbursement this Period 1522.55 <b>Transaction ID : 17-85</b>
City Sacramento	State CA	
Zip Code 95835	Purpose of Disbursement Parking,Supplies,Transportation,Lodging,Web Fees,Telephone	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1835.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey R Gozzo</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 16 / 2014</b>
Mailing Address 3301 North Park Dr., #3315		Amount of Each Disbursement this Period <b>2196.17</b>
City Sacramento State CA Zip Code 95835	Purpose of Disbursement Democratic Club Memberships, Parking, Supplies, Transportation, Lodging, Web Fees Telephone 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)	<b>Transaction ID : 17-86</b>
Category/Type <b>001</b>		

Full Name (Last, First, Middle Initial) <b>B. HP Associates</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 08 / 2014</b>
Mailing Address 264 S. La Cienega Blvd., #182		Amount of Each Disbursement this Period <b>1400.00</b>
City Beverly Hills State CA Zip Code 90211	Purpose of Disbursement Photography 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)	<b>Transaction ID : 17-148</b>
Category/Type <b>001</b>		

Full Name (Last, First, Middle Initial) <b>c. Martin L Hardstark</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 18 / 2014</b>
Mailing Address 11054 Ventura Blvd., #318		Amount of Each Disbursement this Period <b>180.00</b>
City Studio City State CA Zip Code 91604	Purpose of Disbursement Salary - 4/15-4/25/14 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)	<b>Transaction ID : 17-96</b>
Category/Type <b>001</b>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3776.17</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 141			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Martin L Hardstark</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014	
Mailing Address 11054 Ventura Blvd., #318			Amount of Each Disbursement this Period 540.00	
City Studio City	State CA	Zip Code 91604	Transaction ID : 17-120	
Purpose of Disbursement Salary		001 Category/ Type		
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) <b>B. Hart Research Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014	
Mailing Address 1724 Connecticut Ave., NW			Amount of Each Disbursement this Period 24000.00	
City Washington	State DC	Zip Code 20009	Transaction ID : 17-88	
Purpose of Disbursement Survey		005 Category/ Type		
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) <b>c. Anna A Iskikian</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014	
Mailing Address 1390 Coronet Ave.			Amount of Each Disbursement this Period 789.58	
City Pasadena	State CA	Zip Code 91107	Transaction ID : 17-134	
Purpose of Disbursement Salary		001 Category/ Type		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	25329.58
<b>TOTAL</b> This Period (last page this line number only).....	





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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Andrew B Lachman</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 4823 Maytime Ln.		Amount of Each Disbursement this Period 212.36 <b>Transaction ID : 17-106</b>
City Culver City	State CA	
Zip Code 90230	Purpose of Disbursement Food,Supplies	Category/ Type 001
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) <b>B. Andrew B Lachman</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 4823 Maytime Ln.		Amount of Each Disbursement this Period 2043.38 <b>Transaction ID : 17-112</b>
City Culver City	State CA	
Zip Code 90230	Purpose of Disbursement Salary - 4/16-4/30/14	Category/ Type 001
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) <b>c. Andrew B Lachman</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 4823 Maytime Ln.		Amount of Each Disbursement this Period 190.08 <b>Transaction ID : 17-136</b>
City Culver City	State CA	
Zip Code 90230	Purpose of Disbursement Van rental for Photo Shoot	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2445.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 141			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. David Leger</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 1711 Ravenna Ave.		Amount of Each Disbursement this Period 414.20
City Wilmington	State CA	
Zip Code 90744	Purpose of Disbursement Printing	<b>Transaction ID : 17-41</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>B. Automatic Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 1621 Cabrillo Ave.		Amount of Each Disbursement this Period 414.20
City Torrance	State CA	
Zip Code 90501	Purpose of Disbursement Printing	<b>Transaction ID : 17-42-S</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> SUBVENDOR to David Leger
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Christopher J Locke</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 4916 Sara Dr.		Amount of Each Disbursement this Period 300.00
City Torrance	State CA	
Zip Code 90503	Purpose of Disbursement Salary	<b>Transaction ID : 17-125</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	714.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Mailrite Print &amp; Mail, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address <b>834 Striker Ave., Ste.C</b>		Amount of Each Disbursement this Period <b>3817.00</b> <b>Transaction ID : 17-43</b>
City <b>Sacramento</b>	State <b>CA</b>	
Zip Code <b>95834</b>	Purpose of Disbursement <b>Printing</b>	Category/ Type <b>006</b>
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) <b>B. Mailrite Print &amp; Mail, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 07 / 2014</b>
Mailing Address <b>834 Striker Ave., Ste.C</b>		Amount of Each Disbursement this Period <b>27690.07</b> <b>Transaction ID : 17-146</b>
City <b>Sacramento</b>	State <b>CA</b>	
Zip Code <b>95834</b>	Purpose of Disbursement <b>Production Services,Postage</b>	Category/ Type <b>006</b>
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) <b>c. Nicholas L Maldonado</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 18 / 2014</b>
Mailing Address <b>2232 Jack Pl, San Pedro</b>		Amount of Each Disbursement this Period <b>180.00</b> <b>Transaction ID : 17-98</b>
City <b>San Pedro</b>	State <b>CA</b>	
Zip Code <b>90731</b>	Purpose of Disbursement <b>Salary -4/15-4/25/14</b>	Category/ Type <b>001</b>
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>31687.07</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Nicholas L Maldonado</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 2232 Jack Pl, San Pedro		Amount of Each Disbursement this Period 360.00
City San Pedro	State CA Zip Code 90731	
Purpose of Disbursement Salary	Category/Type 001	<b>Transaction ID : 17-114</b>
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) <b>B. Samuel R Meyers</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1261 Starlit Dr.		Amount of Each Disbursement this Period 1031.04
City Laguna Beach	State CA Zip Code 92651	
Purpose of Disbursement Salary	Category/Type 001	<b>Transaction ID : 17-128</b>
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) <b>c. Samuel R Meyers</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1261 Starlit Dr.		Amount of Each Disbursement this Period 17.85
City Laguna Beach	State CA Zip Code 92651	
Purpose of Disbursement Supplies	Category/Type 001	<b>Transaction ID : 17-137</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1408.89
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert A Morrison</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 11251 Rye St.		Amount of Each Disbursement this Period 180.00 <b>Transaction ID : 17-93</b>
City North Hollywood	State CA	
Zip Code 91602	Purpose of Disbursement Salary - 4/15-4/25/14	Category/ Type 001
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) <b>B. Robert A Morrison</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 11251 Rye St.		Amount of Each Disbursement this Period 660.00 <b>Transaction ID : 17-119</b>
City North Hollywood	State CA	
Zip Code 91602	Purpose of Disbursement Salary	Category/ Type 001
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) <b>c. Barbara Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 1411 Melody Ln.		Amount of Each Disbursement this Period 180.00 <b>Transaction ID : 17-94</b>
City Fullerton	State CA	
Zip Code 92831	Purpose of Disbursement Salary - 4/15-4/25/14	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1020.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Barbara Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1411 Melody Ln.		Amount of Each Disbursement this Period 600.00
City Fullerton	State CA Zip Code 92831	
Purpose of Disbursement Salary	Candidate Name	<b>Transaction ID : 17-115</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Gary J Neville</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 812 Lincoln Blvd.		Amount of Each Disbursement this Period 9000.00
City Venice	State CA Zip Code 90291	
Purpose of Disbursement Rent - Security Deposit	Candidate Name	<b>Transaction ID : 17-39</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>c. Gary J Neville</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 812 Lincoln Blvd.		Amount of Each Disbursement this Period 13500.00
City Venice	State CA Zip Code 90291	
Purpose of Disbursement Rent for 3 months	Candidate Name	<b>Transaction ID : 17-40</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Gary J Neville</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 25 / 2014</b>
Mailing Address 812 Lincoln Blvd.		Amount of Each Disbursement this Period <b>455.00</b>
City Venice	State CA	
Zip Code 90291	Purpose of Disbursement Telephone, Signage	<b>Transaction ID : 17-105</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>B. Olson, Hagel &amp; Fishburn, LLP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 25 / 2014</b>
Mailing Address 555 Capitol Mall, #1425		Amount of Each Disbursement this Period <b>538.00</b>
City Sacramento	State CA	
Zip Code 95814-4602	Purpose of Disbursement Professional Services	<b>Transaction ID : 17-103</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>c. Irving Pacheco</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 16 / 2014</b>
Mailing Address 3808 Olive St.		Amount of Each Disbursement this Period <b>209.35</b>
City Huntington Park	State CA	
Zip Code 90255	Purpose of Disbursement Parking, Mileage	<b>Transaction ID : 17-87</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1202.35</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Padilla &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 6380 Wilshire Blvd., #1612		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : 17-37</b>
City Los Angeles	State CA	
Zip Code 90048	Purpose of Disbursement Accounting Fee	Category/ Type 001
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) <b>B. Padilla &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 6380 Wilshire Blvd., #1612		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : 17-132</b>
City Los Angeles	State CA	
Zip Code 90048	Purpose of Disbursement Accounting Fee	Category/ Type 001
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) <b>C. Howard Pasamanick</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 264 S. La Cienega Blvd., #182		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : 17-138</b>
City Beverly Hills	State CA	
Zip Code 90211	Purpose of Disbursement Photography	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4300.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Political Data, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2014</b>
Mailing Address 12501 Imperial Hwy, #200		Amount of Each Disbursement this Period <b>6549.53</b>
City Norwalk State CA Zip Code 90650	Purpose of Disbursement Voter File, Online Software Subscription	<b>Transaction ID : 17-29</b>
Candidate Name	Category/Type <b>001</b>	
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>B. Political Data, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 07 / 2014</b>
Mailing Address 12501 Imperial Hwy, #200		Amount of Each Disbursement this Period <b>1233.90</b>
City Norwalk State CA Zip Code 90650	Purpose of Disbursement Email Files	<b>Transaction ID : 17-147</b>
Candidate Name	Category/Type <b>006</b>	
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>c. RCBS Trust Account</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 21 / 2014</b>
Mailing Address 5429 Madison Ave.		Amount of Each Disbursement this Period <b>1788.98</b>
City Sacramento State CA Zip Code 95841	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : 17-91</b>
Candidate Name	Category/Type <b>001</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>9572.41</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 141			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. RCBS Trust Account</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 5429 Madison Ave.			Amount of Each Disbursement this Period 1776.98
City Sacramento	State CA	Zip Code 95841	
Purpose of Disbursement Payroll Taxes	Candidate Name		<b>Transaction ID : 17-111</b>
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>B. RCBS Trust Account</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 5429 Madison Ave.			Amount of Each Disbursement this Period 418.09
City Sacramento	State CA	Zip Code 95841	
Purpose of Disbursement Payroll Taxes	Candidate Name		<b>Transaction ID : 17-129</b>
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>C. RCBS Trust Account</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 5429 Madison Ave.			Amount of Each Disbursement this Period 375.42
City Sacramento	State CA	Zip Code 95841	
Purpose of Disbursement Payroll Services	Candidate Name		<b>Transaction ID : 17-200</b>
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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2570.49
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Melissa May S. Ramoso</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 8812 Dalen St.		Amount of Each Disbursement this Period 415.58
City Downey State CA Zip Code 90242	Purpose of Disbursement Printing, LA Co. Reg. Copies	
Candidate Name	Category/Type 001	<b>Transaction ID : 17-30</b>
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>B. Automatic Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1621 Cabrillo Ave.		Amount of Each Disbursement this Period 414.20
City Torrance State CA Zip Code 90501	Purpose of Disbursement Printing	
Candidate Name	Category/Type 001	<b>Transaction ID : 17-32-S</b>  <b>[MEMO ITEM]</b> SUBVENDOR to Melissa May S. Ramoso
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>c. Melissa May S. Ramoso</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 8812 Dalen St.		Amount of Each Disbursement this Period 431.75
City Downey State CA Zip Code 90242	Purpose of Disbursement Mileage	
Candidate Name	Category/Type 001	<b>Transaction ID : 17-31</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	847.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 124 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Marc Saltzberg</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 35 Buccaneer, #A		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : 17-144</b>
City Marina Del Rey	State CA Zip Code 90292	
Purpose of Disbursement Salary	Category/Type 001	
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) <b>B. Ronald Schultz</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2014
Mailing Address 9809 Hannum Dr.		Amount of Each Disbursement this Period 180.00 <b>Transaction ID : 17-95</b>
City Los Angeles	State CA Zip Code 90034	
Purpose of Disbursement Salary - 4/15-4/25/14	Category/Type 001	
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) <b>c. Ronald Schultz</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 9809 Hannum Dr.		Amount of Each Disbursement this Period 660.00 <b>Transaction ID : 17-122</b>
City Los Angeles	State CA Zip Code 90034	
Purpose of Disbursement Salary	Category/Type 001	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4340.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Rosemary Sova</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 800 W. 1st St.		Amount of Each Disbursement this Period 180.00
City Los Angeles	State CA	
Zip Code 90012	Purpose of Disbursement Salary 4/15-4/25/14	<b>Transaction ID : 17-101</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>B. Rosemary Sova</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 800 W. 1st St.		Amount of Each Disbursement this Period 540.00
City Los Angeles	State CA	
Zip Code 90012	Purpose of Disbursement Salary	<b>Transaction ID : 17-121</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>c. Standard Parking Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 64200 Wilshire Blvd., Level LL		Amount of Each Disbursement this Period 260.00
City Los Angeles	State CA	
Zip Code 90048	Purpose of Disbursement Parking for 4/16/14 Event	<b>Transaction ID : 17-142</b>
Candidate Name	003 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	980.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Statecraft, Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 8618 Nottingham Place		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : 17-38</b>
City La Jolla	State CA	
Zip Code 92037	Purpose of Disbursement Licensing Fee	Category/ Type 001
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) <b>B. Statecraft, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address 8618 Nottingham Place		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : 17-133</b>
City La Jolla	State CA	
Zip Code 92037	Purpose of Disbursement Licensing Fee	Category/ Type 001
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) <b>c. Marc Sussman</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2014
Mailing Address 619a S. Cypress St.		Amount of Each Disbursement this Period 205.00 <b>Transaction ID : 17-45</b>
City Orange	State CA	
Zip Code 92866	Purpose of Disbursement Phone Services	Category/ Type 001
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	455.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Marc Sussman</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 619a S. Cypress St.		Amount of Each Disbursement this Period 1695.34
City Orange	State CA	
Zip Code 92866	Purpose of Disbursement Salary - 4/1-4/15/14	<b>Transaction ID : 17-90</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>B. Marc Sussman</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 619a S. Cypress St.		Amount of Each Disbursement this Period 249.21
City Orange	State CA	
Zip Code 92866	Purpose of Disbursement Supplies,Postage,Parking	<b>Transaction ID : 17-108</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 24313 Crenshaw Blvd.		Amount of Each Disbursement this Period 235.39
City Torrance	State CA	
Zip Code 90505	Purpose of Disbursement Supplies	<b>Transaction ID : 17-109-S</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1944.55
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 141			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Marc Sussman</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 619a S. Cypress St.		Amount of Each Disbursement this Period 1695.34
City Orange	State CA	
Zip Code 92866	Purpose of Disbursement Salary - 4/16-4/30/14	<b>Transaction ID : 17-113</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>B. Marc Sussman</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 619a S. Cypress St.		Amount of Each Disbursement this Period 279.63
City Orange	State CA	
Zip Code 92866	Purpose of Disbursement Printing,Supplies	<b>Transaction ID : 17-135</b>
Candidate Name	001 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:		

Full Name (Last, First, Middle Initial) <b>C. William Sweeney</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 21721 Evalyn Ave.		Amount of Each Disbursement this Period 180.00
City Torrance	State CA	
Zip Code 90503	Purpose of Disbursement Salary - 4/15-4/25/14	<b>Transaction ID : 17-99</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2154.97
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. William Sweeney</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 21721 Evalyn Ave.		Amount of Each Disbursement this Period 660.00 <b>Transaction ID : 17-118</b>
City Torrance	State CA	
Zip Code 90503	Purpose of Disbursement Salary	Category/ Type 001
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) <b>B. Tim Davis Advertising &amp; Design</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 423 Santa Ynez Wayt		Amount of Each Disbursement this Period 1871.63 <b>Transaction ID : 17-48</b>
City Sacramento	State CA	
Zip Code 95816	Purpose of Disbursement Design Production	Category/ Type 006
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) <b>c. Tim Davis Advertising &amp; Design</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 423 Santa Ynez Wayt		Amount of Each Disbursement this Period 162.75 <b>Transaction ID : 17-104</b>
City Sacramento	State CA	
Zip Code 95816	Purpose of Disbursement Design & Production of Lawn Signs	Category/ Type 006
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2694.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 130 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Tim Davis Advertising &amp; Design</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014	
Mailing Address 423 Santa Ynez Wayt			Amount of Each Disbursement this Period 1925.88	
City Sacramento	State CA	Zip Code 95816	Transaction ID : 17-145	
Purpose of Disbursement Design, Production		Category/ Type 006		
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) <b>B. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address 2965 W. Corporate Lakes Blvd.			Amount of Each Disbursement this Period 5018.75	
City Weston	State FL	Zip Code 33331	Transaction ID : 17-96-W	
Purpose of Disbursement Credit Card Payment		Category/ Type		
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)		Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.	
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Chase Card Services</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014	
Mailing Address 2500 Westfield Dr.			Amount of Each Disbursement this Period 3585.90	
City Elgin	State IL	Zip Code 60124	Transaction ID : 17-43-W	
Purpose of Disbursement Credit Card Payment		Category/ Type		
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)		Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.	
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10530.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 141			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 1030 Delta Blvd.		Amount of Each Disbursement this Period 245.00
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Airfare-T.Lieu-2/6/14-LAX/SMF/LAX	<b>Transaction ID : 17-73-P</b>
Candidate Name	Category/ Type 002	
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)	<b>[MEMO ITEM]</b> credit card payee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Relativitystrategic.com</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 3201 S St.		Amount of Each Disbursement this Period 225.00
City Sacramento	State CA	
Zip Code 95816	Purpose of Disbursement Website	<b>Transaction ID : 17-72-P</b>
Candidate Name	Category/ Type 001	
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)	<b>[MEMO ITEM]</b> credit card payee
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address P.O. Box 66100		Amount of Each Disbursement this Period 678.00
City Chicago	State IL	
Zip Code 60660	Purpose of Disbursement Airfare-J.Gozzo-3/2/14-SMF/IAD/SMF	<b>Transaction ID : 17-70-P</b>
Candidate Name	Category/ Type 002	
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)	<b>[MEMO ITEM]</b> credit card payee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Virgin America Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 555 Airport Blvd.		Amount of Each Disbursement this Period 735.00
City Burlingame	State CA	
Zip Code 94010	Purpose of Disbursement Airfare-T.Lieu-3/2/14-LAX/IAD/LAX	<b>Transaction ID : 17-71-P</b>
Candidate Name	Category/Type 002	
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)	<b>[MEMO ITEM]</b> credit card payee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chase Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 2500 Westfield Dr.		Amount of Each Disbursement this Period 2433.65
City Elgin	State IL	
Zip Code 60124	Purpose of Disbursement Credit Card Payment	<b>Transaction ID : 17-48-W</b>
Candidate Name	Category/Type 002	
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)	Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Contemporary Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 16900 Burbank Blvd.		Amount of Each Disbursement this Period 3465.79
City Encino	State CA	
Zip Code 91316	Purpose of Disbursement Catering for 4/16/14 F/R Event	<b>Transaction ID : 17-203-P</b>
Candidate Name	Category/Type 003	
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)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D American Express
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2433.65
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 133 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 225.02
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement Telephone	<b>Transaction ID : 17-202-P</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D American Express
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wine Country Gift Baskets</b>		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address 4225 N. Palm St.		Amount of Each Disbursement this Period 672.85
City Fullerton	State CA	
Zip Code 92835	Purpose of Disbursement Gift Baskets for 4/16/14 F/R Event	<b>Transaction ID : 17-201-P</b>
Candidate Name	003 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)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D American Express
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobilty</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2014
Mailing Address P.O. Box 537104		Amount of Each Disbursement this Period 1342.31
City Atlanta	State GA	
Zip Code 30353-7104	Purpose of Disbursement Cell Phones for Volunteer Calling	<b>Transaction ID : 17-207-P</b>
Candidate Name	001 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)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D American Express
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 141			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. AmTrak</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 800 N. Alameda St.		Amount of Each Disbursement this Period 259.00
City Los Angeles	State CA	
Zip Code 90012	Purpose of Disbursement Transportation-5/18/14-NY/DC -F/R Events	<b>Transaction ID : 17-212-P</b>
Candidate Name	Category/ Type 002	
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)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D American Express
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Automatic Printing Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 1621 Cabrillo Ave.		Amount of Each Disbursement this Period 144.43
City Torrance	State CA	
Zip Code 90501	Purpose of Disbursement Printing	<b>Transaction ID : 17-208-P</b>
Candidate Name	Category/ Type 001	
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)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D American Express
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Continental Colorcraft</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 1166 West Garvey Ave.		Amount of Each Disbursement this Period 1111.85
City Monterey Park	State CA	
Zip Code 91754	Purpose of Disbursement Printing	<b>Transaction ID : 17-210-P</b>
Candidate Name	Category/ Type 001	
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)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D American Express
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Foley Estates</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 6121 E. Hwy 246		Amount of Each Disbursement this Period 319.84
City Lompoc State CA Zip Code 93436	Purpose of Disbursement F/R Gift	Transaction ID : 17-214-P
Candidate Name	003 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)	[MEMO ITEM] Credit card payee, see Schedule D American Express
State: District:		

Full Name (Last, First, Middle Initial) <b>B. L.A. County Fire Department Film Permit</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 6255 W. Sunset Blvd., 12th Fl.		Amount of Each Disbursement this Period 288.30
City Los Angeles State CA Zip Code 90028	Purpose of Disbursement Film Permit	Transaction ID : 17-213-P
Candidate Name	001 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)	[MEMO ITEM] Credit card payee, see Schedule D American Express
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 155.71
City Dallas State TX Zip Code 75266-0108	Purpose of Disbursement Telephone	Transaction ID : 17-209-P
Candidate Name	001 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)	[MEMO ITEM] Credit card payee, see Schedule D American Express
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 141	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Virgin America Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 555 Airport Blvd.		Amount of Each Disbursement this Period 648.00
City Burlingame	State CA	
Zip Code 94010	Purpose of Disbursement Airfare-5/17/14-T.Lieu-LAX/IAD/EWR/LAX-5/17/14 F/R Event	<b>Transaction ID : 17-211-P</b>
Candidate Name	Category/Type 002	
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)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D American Express
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wine Country Gift Baskets</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 4225 N. Palm St.		Amount of Each Disbursement this Period 478.04
City Fullerton	State CA	
Zip Code 92835	Purpose of Disbursement Gift Baskets for F/R Events	<b>Transaction ID : 17-206-P</b>
Candidate Name	Category/Type 003	
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)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D American Express
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	408143.52



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 141			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Andrew Govenar</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 1370 Vallejo Way		Amount of Each Disbursement this Period 1000.00
City Sacramento	State CA Zip Code 95818	
Purpose of Disbursement Return of 05/14/2014 Contribution	Category/Type 010	<b>Transaction ID : 20A-218</b>
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) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
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) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 141	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Full Name (Last, First, Middle Initial) <b>A. Democrats for Israel</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 25 / 2014</b>
Mailing Address 3700 Wilshire Blvd., #1050-B		Amount of Each Disbursement this Period <b>250.00</b>
City Los Angeles	State CA	
Purpose of Disbursement Donation	Zip Code 90010	<b>Transaction ID : 21-107</b>
Candidate Name	Category/ Type <b>012</b>	
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>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
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) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>250.00</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

Transaction ID : C10-1-LR

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

**Ted Lieu**

Primary  
 General  
 Other (specify) ▼

Mailing Address  
6380 Wilshire Blvd # 1612

City State ZIP Code  
Los Angeles CA 90048

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
55000.00 0.00 55000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 03 / D 31 / Y 2014 M 03 / D 31 / Y 2015 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 55000.00  
**TOTALS** This Period (last page in this line only)..... ▶ 55000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Ted Lieu For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Buchert Development LLC</b>	Nature of Debt (Purpose): Fundraising Management Fee
Mailing Address 1600 Redondo Ave., #4	
City State Zip Code Long Beach CA 90804	

Outstanding Balance Beginning This Period 4000.00	<b>Transaction ID : D10-352-V</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jeffrey R Gozzo</b>	Nature of Debt (Purpose): Parking,Supplies,Transportation,Lodging,Web Fees,Telephone
Mailing Address 3301 North Park Dr., #3315	
City State Zip Code Sacramento CA 95835	

Outstanding Balance Beginning This Period 2196.17	<b>Transaction ID : D10-100-V</b>	
Amount Incurred This Period 0.00	Payment This Period 2196.17	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Robin Gozzo</b>	Nature of Debt (Purpose): Democratic Club Memberships
Mailing Address 3301 North Park Dr., #3315	
City State Zip Code Sacramento CA 95835	

Outstanding Balance Beginning This Period 60.00	<b>Transaction ID : D10-558-V</b>	
Amount Incurred This Period 0.00	Payment This Period 60.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	4000.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Ted Lieu For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Data, Inc.</b>		Nature of Debt (Purpose): Online Software/Voter File
Mailing Address 12501 Imperial Hwy, #200		
City	State	Zip Code
Norwalk	CA	90650

Outstanding Balance Beginning This Period	<b>Transaction ID : D10-14-V</b>	
6549.53		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	6549.53	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>American Express</b>		Nature of Debt (Purpose): Various credit card purchases. Purpose appears/appeared on Schedule B Credit Card Payee memo records
Mailing Address 2965 W. Corporate Lakes Blvd.		
City	State	Zip Code
Weston	FL	33331

Outstanding Balance Beginning This Period	<b>Transaction ID : D10-697-W</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
11627.58	5018.75	6608.83

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chase Card Services</b>		Nature of Debt (Purpose): Various credit card purchases. Purpose appears/appeared on Schedule B Credit Card Payee memo records
Mailing Address 2500 Westfield Dr.		
City	State	Zip Code
Elgin	IL	60124

Outstanding Balance Beginning This Period	<b>Transaction ID : D10-548-W</b>	
2433.65		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
3585.90	6019.55	0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	6608.83
2) <b>TOTALS</b> This Period (last page this line number only) .....	10608.83
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	55000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	65608.83