

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

HERBALIFE PAC

ADDRESS (number and street) 990 West 190th Street

Check if different than previously reported. (ACC) Torrance CA 90502

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00393298

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE-Election** Report for the:
- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S)            |                                       |

Election on 11 02 2010 in the State of

- (d) 30-Day **Post -Election** Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on in the State of

5. Covering Period 10 01 2010 through 10 13 2010

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 Richard Goudis

Signature of Treasurer Electronically Filed by Richard Goudis Date 10 19 2010

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

|                 |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|

**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
HERBALIFE PAC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
| 1 | 3 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |          |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand<br>January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 1 | 0 |  | 37598.27 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |          |
| 2   | 0                       | 1                                 | 0 |   |   |   |   |   |  |          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 23603.03                |                                   |   |   |   |   |   |   |  |          |
| (c) Total Receipts (from Line 19) .....   | 3186.50                 | 80274.69                          |   |   |   |   |   |   |  |          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 26789.53                | 117872.96                         |   |   |   |   |   |   |  |          |
| 7. Total Disbursements (from Line 31) .....   | 2000.00                 | 93083.43                          |   |   |   |   |   |   |  |          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 24789.53                | 24789.53                          |   |   |   |   |   |   |  |          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |          |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |   |   |   |   |   |   |  |          |

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
HERBALIFE PAC

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
| 1 | 3 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | 3054.25                       | 68271.93                          |
| (ii) Unitemized .....  | 132.25                        | 12002.76                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 3186.50                       | 80274.69                          |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 3186.50                       | 80274.69                          |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 3186.50                       | 80274.69                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 3186.50                       | 80274.69                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 21. Operating Expenditures:  |                                       |   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |                                       |   |
| (i) Federal Share.....   | 0.00                                  | 0.00                                      |
| (ii) Non-Federal Share.....  | 0.00                                  | 0.00                                      |
| (b) Other Federal Operating Expenditures.....  | 0.00                                  | 583.43                                    |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶                        | 0.00                                  | 583.43                                    |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                                  | 0.00                                      |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 2000.00                               | 92500.00                                  |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00                                  | 0.00                                      |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00                                  | 0.00                                      |
| 26. Loan Repayments Made.....  | 0.00                                  | 0.00                                      |
| 27. Loans Made.....  | 0.00                                  | 0.00                                      |
| 28. Refunds of Contributions To:   |                                       |   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                                  | 0.00                                      |
| (b) Political Party Committees   | 0.00                                  | 0.00                                      |
| (c) Other Political Committees (such as PACs) .....  | 0.00                                  | 0.00                                      |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00                                  | 0.00                                      |
| 29. Other Disbursements.....   | 0.00                                  | 0.00                                      |
| 30. Federal Election Activity (2 U.S.C 431(20))  |                                       |   |
| (a) Shared Federal Election Activity (from Schedule H6)  |                                       |   |
| (i) Federal Share .....  | 0.00                                  | 0.00                                      |
| (ii) "Levin" Share .....   | 0.00                                  | 0.00                                      |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                                  | 0.00                                      |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 0.00                                  | 0.00                                      |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 2000.00                               | 93083.43                                  |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 2000.00                               | 93083.43                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

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| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 3186.50                       | 80274.69                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 3186.50                       | 80274.69                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 583.43                            |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 0.00                          | 583.43                            |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
**HERBALIFE PAC**

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

Mailing Address 1550 Cliftonville Avenue

City State Zip Code  
**Los Angeles CA 90025**

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

Name of Employer Occupation  
Herbalife Creative Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **714.30**

Date of Receipt **10 / 01 / 2010**

**Transaction ID: 5751**

Amount of Each Receipt this Period **47.62**

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

Mailing Address 35 Wlilmington Drive

City State Zip Code  
**WATERFORD CT 06385**

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

Name of Employer Occupation  
Herbalife International VP Global Strategies

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **714.15**

Date of Receipt **10 / 01 / 2010**

**Transaction ID: 5753**

Amount of Each Receipt this Period **47.61**

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

Mailing Address 5805 W. 77th Place

City State Zip Code  
**Los Angeles CA 90045**

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

Name of Employer Occupation  
Herbalife International Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **10 / 01 / 2010**

**Transaction ID: 5754**

Amount of Each Receipt this Period **25.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **120.23**

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

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

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

FOR LINE NUMBER: PAGE 7 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**HERBALIFE PAC**

**A.** Full Name (Last, First, Middle Initial)  
Robyn M. Browning

Mailing Address **3847 Hepburn Avenue**

City **Los Angeles** State **CA** Zip Code **90008**

FEC ID number of contributing federal political committee. C

Name of Employer **Herbalife** Occupation **Executive Director Familiy Foundation**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 727.20

Date of Receipt M M / D D / Y Y Y Y  
10 / 01 / 2010

**Transaction ID: 5755**

Amount of Each Receipt this Period 45.45

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

Mailing Address **250 Corina Avenue**

City **Long Beach** State **CA** Zip Code **90803**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 363.42

Date of Receipt M M / D D / Y Y Y Y  
10 / 01 / 2010

**Transaction ID: 5756**

Amount of Each Receipt this Period 27.31

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

Mailing Address **3780 Wasatch Ave**

City **Los Angeles** State **CA** Zip Code **90066**

FEC ID number of contributing federal political committee. C

Name of Employer **Herbalife** Occupation **Dir - WW Marketing**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 714.30

Date of Receipt M M / D D / Y Y Y Y  
10 / 01 / 2010

**Transaction ID: 5757**

Amount of Each Receipt this Period 47.62

**SUBTOTAL** of Receipts This Page (optional) ..... 120.38

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|   |  |             |
|---|--|-------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 8 / 24 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |             |

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

|   |   |   |   |
|---|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Jean Marie Cacciatore    |   | Date of Receipt   |
|   | Mailing Address 4208 E. 6th Street                                  |   | <input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2010"/> |
|   | City  | State   | Zip Code  |
|   | Long Beach  | CA  | 90814   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   | Transaction ID: 5758  |
| Name of Employer<br>Herbalife International   |   | Occupation<br>VP, International HR                              | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br><input type="text" value="714.15"/> | <input type="text" value="47.61"/>  |

|   |   |   |   |
|---|---|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Sandra Calloway          |   | Date of Receipt   |
|   | Mailing Address 5709 Carfax Avenue                                  |   | <input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2010"/> |
|   | City  | State   | Zip Code  |
|   | Lakewood  | CA  | 90713   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   | Transaction ID: 5759  |
| Name of Employer<br>Herbalife International   |   | Occupation<br>Dir., Global Customs Ops. Compliance              | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br><input type="text" value="357.00"/> | <input type="text" value="23.80"/>  |

|   |   |  |   |
|---|---|--|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Brett R. Chapman         |  | Date of Receipt   |
|   | Mailing Address 5054 Royal Vista Court                              |  | <input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2010"/> |
|   | City  | State  | Zip Code  |
|   | Thousand Oaks   | CA   | 91362   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |  | Transaction ID: 5760  |
| Name of Employer<br>Herbalife International   |   | Occupation<br>General Counsel                                    | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br><input type="text" value="1400.00"/> | <input type="text" value="100.00"/>   |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="171.41"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                |



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

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

FOR LINE NUMBER: PAGE 9 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

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

Mailing Address 990 West 190th Street  
Suite 650

City Torrance State CA Zip Code 90502

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

**Transaction ID: 5761**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mark P. Clark

Mailing Address 2173 Lake Page Drive

City Collierville State TN Zip Code 38017

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

Name of Employer Herbalife International Occupation Manager, IT Projects

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 214.35

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

**Transaction ID: 5762**

Amount of Each Receipt this Period  
14.29

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

Mailing Address 2936 Via de la Fuerra

City Palos Verdes State CA Zip Code 90274

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

Name of Employer Herbalife International Occupation Global Talent Mgmt & Development

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

**Transaction ID: 5763**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **89.29**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 24  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>Julie Delaney  |   | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 3132 W 139th Street   |   | <b>Transaction ID:</b> 5764                         |
| City<br>Torrance  | State<br>CA                             | Zip Code<br>90804                                   |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>23.80         |
| Name of Employer<br>Herbalife International   | Occupation<br>Sr. Director - Operations |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>357.00      |   |

**B.**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>John Desimone  |                                     | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 6100 DeSoto Avenue<br>Apt. 636  |                                     | <b>Transaction ID:</b> 5765                         |
| City<br>Woodland Hills  | State<br>CA                         | Zip Code<br>91367                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>200.00        |
| Name of Employer<br>Herbalife International   | Occupation<br>SVP - Finance         |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2800.00 |   |

**C.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Winston Fan  |                                    | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 552 2nd Street  |                                    | <b>Transaction ID:</b> 5766                         |
| City<br>Manhattan Beach   | State<br>CA                        | Zip Code<br>90266                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Amount of Each Receipt this Period<br>25.00         |
| Name of Employer<br>Herbalife International   | Occupation<br>Treasurer            |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00 |   |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 248.80 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 24  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>Ibelis Fleming   |   | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 5228 W. 119th Place   |   | <b>Transaction ID:</b> 5767                         |
| City<br>Inglewood   | State<br>CA                                       | Zip Code<br>90304                                   |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>47.61         |
| Name of Employer<br>Herbalife International   | Occupation<br>Sr. Dir, US Latin Sales & Marketing |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>714.15                |   |

**B.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Barbara Esther Gajate Kordek   |                                    | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 2939 Denison Avenue   |                                    | <b>Transaction ID:</b> 5769                         |
| City<br>San Pedro   | State<br>CA                        | Zip Code<br>90731                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Amount of Each Receipt this Period<br>23.81         |
| Name of Employer<br>Herbalife International   | Occupation<br>Sr. Director         |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>357.15 |   |

**C.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Rushell Gordon   |                                    | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 4126 W 63rd Street  |                                    | <b>Transaction ID:</b> 5770                         |
| City<br>Los Angeles   | State<br>CA                        | Zip Code<br>90543                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Amount of Each Receipt this Period<br>25.00         |
| Name of Employer<br>Herbalife International   | Occupation<br>Director             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>375.00 |   |

|  |   |       |
|--|---|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 96.42 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |       |

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

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

FOR LINE NUMBER: PAGE 12 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.** Full Name (Last, First, Middle Initial)  
Richard Goudis  
 Mailing Address 26620 Alsace Drive  
 City Calabasas State CA Zip Code 91302  
 Date of Receipt 10 / 01 / 2010  
**Transaction ID: 5771**  
 Amount of Each Receipt this Period 190.48  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife Occupation CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2857.20

**B.** Full Name (Last, First, Middle Initial)  
Paul R. Greenberg  
 Mailing Address 703 North Oakhurst Drive  
 City Beverly Hills State CA Zip Code 90210  
 Date of Receipt 10 / 01 / 2010  
**Transaction ID: 5773**  
 Amount of Each Receipt this Period 119.05  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation Sr. Council Legal Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1785.75

**C.** Full Name (Last, First, Middle Initial)  
Lance J. Harding  
 Mailing Address 930 North Doheny Drive #107  
 City West Hollywood State CA Zip Code 90069  
 Date of Receipt 10 / 01 / 2010  
**Transaction ID: 5775**  
 Amount of Each Receipt this Period 22.28  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife Occupation Sr. Director Nutritional Product Licen  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.20

**SUBTOTAL** of Receipts This Page (optional) ..... ► 331.81  
**TOTAL** This Period (last page this line number only) ..... ►

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

|   |  |
|---|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: <span style="float: right;">PAGE 13 / 24</span>   |
| (check only one)  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**HERBALIFE PAC**

|   |  |   |   |
|---|--|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Edi Hienrich    |   | Date of Receipt   |
|   | Mailing Address 3657 Sapphire Drive                        |   | <input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2010"/> |
|   | City   | State                                     | Zip Code  |
|   | Encino   | CA  | 91436   |
|   | FEC ID number of contributing federal political committee. |   | <input type="text" value="C"/>  |
| Name of Employer<br>HerbaLife International   |  | Occupation<br>VP International Operations | <b>Transaction ID: 5776</b>   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼                  | Amount of Each Receipt this Period  |
|   |  | <input type="text" value="1058.76"/>      | <input type="text" value="88.23"/>  |

|   |  |  |   |
|---|--|--|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Jennifer Hienrich |  | Date of Receipt   |
|   | Mailing Address 3657 Sapphire Drive                          |  | <input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2010"/> |
|   | City   | State                                      | Zip Code  |
|   | Encino   | CA   | 91436   |
|   | FEC ID number of contributing federal political committee.   |  | <input type="text" value="C"/>  |
| Name of Employer<br>Herbalife International   |  | Occupation<br>VP - WW Distributor Services | <b>Transaction ID: 5777</b>   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼                   | Amount of Each Receipt this Period  |
|   |  | <input type="text" value="705.84"/>        | <input type="text" value="58.82"/>  |

|   |   |                                     |   |
|---|---|-------------------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Lenard E. Kasang |                                     | Date of Receipt   |
|   | Mailing Address 331 Wisconsin Avenue                        |                                     | <input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2010"/> |
|   | City  | State                               | Zip Code  |
|   | Long Beach  | CA                                  | 90814   |
|   | FEC ID number of contributing federal political committee.  |                                     | <input type="text" value="C"/>  |
| Name of Employer<br>Herbalife   |   | Occupation<br>VP - R&D              | <b>Transaction ID: 5780</b>   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼            | Amount of Each Receipt this Period  |
|   |   | <input type="text" value="714.30"/> | <input type="text" value="47.62"/>  |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="194.67"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 24  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lyon Kassab

Mailing Address 1271 Stoner Avenue  
#205

City State Zip Code  
Los Angeles CA 90025

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

Name of Employer Occupation  
HerbaLife International Sr Dir Sales Stragey

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 357.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: 5781

Amount of Each Receipt this Period  
23.80

**B.**

Full Name (Last, First, Middle Initial)  
Laura Kebschull

Mailing Address 990 W 190th Street

City State Zip Code  
Torrance CA 90502

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

Name of Employer Occupation  
Herbalife Dir - Supply Chain Planning

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: 5782

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Fumiko Kimura

Mailing Address 4469 Via Marina  
#209

City State Zip Code  
Marina Rel Rey CA 90292

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

Name of Employer Occupation  
Herbalife International Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: 5783

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **73.80**

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

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

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

FOR LINE NUMBER: PAGE 15 / 24

(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Frank G. Lamberti, Jr.

Mailing Address 2911 Golden Meadow Drive

City State Zip Code  
Rancho Palos Verde CA 90275

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

Name of Employer Occupation  
Herbalife VP Finance & DS Opoerations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt

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

Transaction ID: 5784

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)  
John Latini

Mailing Address 4733 Villa Marina Way  
Unit D

City State Zip Code  
Marina del rey CA 90266

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

Name of Employer Occupation  
Herbalife International Sr Dir Tax Compliance

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 357.00

Date of Receipt

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

Transaction ID: 5786

Amount of Each Receipt this Period

23.80

**C.**

Full Name (Last, First, Middle Initial)  
Margaret Launzel-Pennes

Mailing Address 2130 Patricia Avenue

City State Zip Code  
Los Angeles CA 90025

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

Name of Employer Occupation  
Herbalife Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 714.15

Date of Receipt

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

Transaction ID: 5787

Amount of Each Receipt this Period

47.61

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

146.41

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.** Full Name (Last, First, Middle Initial)  
Gary Leemaster  
 Mailing Address 20901 Gorgovia Street  
 City State Zip Code  
 Woodland Hills CA 91364  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 0 1 / 2 0 1 0  
**Transaction ID: 5788**  
 Amount of Each Receipt this Period  
 33.33  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Herbalife International Director  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 299.97

**B.** Full Name (Last, First, Middle Initial)  
Robert Levy  
 Mailing Address 10584 Bradbury Road  
 City State Zip Code  
 Los Angeles CA 90064  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 0 1 / 2 0 1 0  
**Transaction ID: 5789**  
 Amount of Each Receipt this Period  
 190.47  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Herbalife International Sr VP, Americas Operations  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2857.05

**C.** Full Name (Last, First, Middle Initial)  
Deborah Lujan  
 Mailing Address 13709 Grider Avenue  
 City State Zip Code  
 Hawthorne CA 90250  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 0 1 / 2 0 1 0  
**Transaction ID: 5790**  
 Amount of Each Receipt this Period  
 25.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Herebalife International Director, Compensation & Benefits  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 248.80  
**TOTAL** This Period (last page this line number only) ..... ►



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

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

FOR LINE NUMBER: PAGE 17 / 24  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

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

Mailing Address 1702 Pineton Avenue

City State Zip Code  
Pro Ruan CA 90060

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

Name of Employer Occupation  
Herbalife International Director, Sales - Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 714.15

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

**Transaction ID:** 5791

Amount of Each Receipt this Period  
47.61

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

Mailing Address 808 Cranebrook Avenue #844

City State Zip Code  
Torrance CA 90503

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

Name of Employer Occupation  
Herbalife International VP U.S. Sales & Communications

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 714.15

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

**Transaction ID:** 5793

Amount of Each Receipt this Period  
47.61

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

Mailing Address 2573 Goodview Drive

City State Zip Code  
Germantown TN 38139

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

Name of Employer Occupation  
Herbalife Sr Director, Distribution

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 357.15

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

**Transaction ID:** 5795

Amount of Each Receipt this Period  
23.81

**SUBTOTAL** of Receipts This Page (optional) ..... ► **119.03**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 24  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Martin Ott

Mailing Address 2594 Armstrong Avenue

City State Zip Code  
Los Angeles CA 90039

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

Name of Employer Occupation  
Herbalife Dir-Distributor Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 312.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: 5796

Amount of Each Receipt this Period  
31.25

**B.**

Full Name (Last, First, Middle Initial)  
David Pezzullo

Mailing Address 25936 Vermouth Court

City State Zip Code  
Stevenson Ranch CA 91381

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

Name of Employer Occupation  
HERBALIFE Senior VP Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2142.75

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: 5797

Amount of Each Receipt this Period  
142.85

**C.**

Full Name (Last, First, Middle Initial)  
Alan A Quan

Mailing Address 941 Calle Canta

City State Zip Code  
GLENDALE CA 91208

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

Name of Employer Occupation  
Herbalife Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: 5798

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **199.10**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 24  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>William M Rahn   |                                     | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 800 W Olympic Blvd<br>Suite 406   |                                     | <b>Transaction ID:</b> 5799                         |
| City<br>Los Angeles   | State<br>CA                         | Zip Code<br>90015                                   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                     | Amount of Each Receipt this Period<br>119.05        |
| Name of Employer<br>Herbalife   | Occupation<br>SR VO APAC            |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1785.75 |   |

**B.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Roxane O. Romans   |                                    | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 3919 Latigo Canyon Road   |                                    | <b>Transaction ID:</b> 5800                         |
| City<br>Malibu  | State<br>CA                        | Zip Code<br>90265                                   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                    | Amount of Each Receipt this Period<br>25.00         |
| Name of Employer<br>Herbalife International   | Occupation<br>Director             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>350.00 |   |

**C.**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>Patti Sabel  |   | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 522 Hillgreen Drive   |   | <b>Transaction ID:</b> 5801                         |
| City<br>Beverly Hills   | State<br>CA                               | Zip Code<br>90212                                   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |   | Amount of Each Receipt this Period<br>35.71         |
| Name of Employer<br>Herbalife International   | Occupation<br>VP, Assistant Chief Counsel |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>535.65        |   |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 179.76 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 24  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br>Kenneth Shropshire   |  | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 4304 Walnut Street #7   |  | Transaction ID: 5803                                |
| City<br>Balwin Park   | State<br>CA                                  | Zip Code<br>91706                                   |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>25.00         |
| Name of Employer<br>Herbalife   | Occupation<br>Director - Process Improvement |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>350.00           |   |

**B.**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br>Kenneth J. Simon   |   | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 3513 Elm Avenue   |   | Transaction ID: 5804                                |
| City<br>Manhattan Beach   | State<br>CA                                       | Zip Code<br>90266                                   |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>47.61         |
| Name of Employer<br>Herbalife International   | Occupation<br>Vice President - Worldwide Taxation |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>714.15                |   |

**C.**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br>Cameron B. Smith   |  | Date of Receipt<br>MM / DD / YYYY<br>10 / 01 / 2010 |
| Mailing Address 129 North Oxford Avenue Apt. 206  |  | Transaction ID: 5805                                |
| City<br>Los Angeles   | State<br>CA                              | Zip Code<br>90004                                   |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>22.72         |
| Name of Employer<br>Herbalife International   | Occupation<br>Dir Int'l and Govt Affairs |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>363.52       |   |

|  |   |       |
|--|---|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 95.33 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |       |

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

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

FOR LINE NUMBER: PAGE 21 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

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

Mailing Address 4805 West 8th Street

City State Zip Code  
Los Angeles CA 90005

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

Name of Employer Occupation  
Herbalife International Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 357.15

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 01 / 2010

**Transaction ID: 5806**

Amount of Each Receipt this Period  
23.81

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

Mailing Address 257 S. Pickett Street #402

City State Zip Code  
Alexandria VA 22304

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

Name of Employer Occupation  
Herbalife International Sr. Dir. Gov't Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 714.15

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 01 / 2010

**Transaction ID: 5808**

Amount of Each Receipt this Period  
47.61

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

Mailing Address 448 32nd Street

City State Zip Code  
Manhattan Beach CA 90266

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

Name of Employer Occupation  
Herbalife International VP W.W. Regulatory & Gov't Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1785.75

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 01 / 2010

**Transaction ID: 5809**

Amount of Each Receipt this Period  
119.05

**SUBTOTAL** of Receipts This Page (optional) ..... ► 190.47

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 24  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Amy Greene Vinson

Mailing Address 2280 Sherwood Road

City San Marino State CA Zip Code 91168

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

Name of Employer Herbalife International Occupation VP of Investor Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 727.20

Date of Receipt 10 / 01 / 2010

Transaction ID: 5810

Amount of Each Receipt this Period 45.45

**B.**

Full Name (Last, First, Middle Initial)  
Timothy M. Waters

Mailing Address 2400 Harriman Lane

City Redondo Beach State CA Zip Code 90278

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

Name of Employer Herbalife International Occupation Sr. Director, Pricing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 10 / 01 / 2010

Transaction ID: 5812

Amount of Each Receipt this Period 100.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard Yamashita

Mailing Address 10737 Kelmore Street

City Culver City State CA Zip Code 90230

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

Name of Employer Herbalife International Occupation VP, Treasurer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt 10 / 01 / 2010

Transaction ID: 5813

Amount of Each Receipt this Period 45.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 190.45

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

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

|   |                              |                              |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             |                              | PAGE 23 / 24                |                             |
|   | (check only one)             |                              |                             |                             |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

|   |  |  |   |                                     |                             |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|---|--|--|---|-------------------------------------|-----------------------------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Thomas Zimmer |  | Date of Receipt   |                                     |                             |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|   | Mailing Address 4911 Avenida Osiaste                     |  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> |                                     | M                           | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 0 | 1 |  | 2 | 0 | 1 | 0 |
|   | M  | M  | /   | D                                   | D                           | / | Y | Y | Y | Y |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|   | 1  | 0  |   | 0                                   | 1                           |   | 2 | 0 | 1 | 0 |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|   | City   | State                                      | Zip Code  |                                     | <b>Transaction ID:</b> 5814 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|   | Tarzana  | CA   | 91356   |                                     |                             |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| FEC ID number of contributing federal political committee.  |  | <input type="text" value="C"/>             |   | Amount of Each Receipt this Period  |                             |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Name of Employer<br>HerbaLife   |  | Occupation<br>SVP & Managing Director - NA |   | <input type="text" value="238.09"/> |                             |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼                   |   |                                     |                             |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|   |  | <input type="text" value="3571.35"/>       |   |                                     |                             |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="238.09"/>  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text" value="3054.25"/> |

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

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

FOR LINE NUMBER: (check only one)

PAGE 24 / 24

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

A.

Full Name (Last, First, Middle Initial)  
**CONSERVATIVE OPPURTUNITY LEADERSHIP AND ENTERPRISE PAC (COLE PAC)**

Transaction ID: 5881

Date of Disbursement

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

Mailing Address 12176 Chancery Station Circle

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

City Reston State VA Zip Code 20190

Purpose of Disbursement

|  |
|--|
|  |
|--|

Candidate Name  
**CONSERVATIVE OPPURTUNITY LEADERSHIP AND ENTERPRISE PAC (COLE PAC)**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
**JON BARELA FOR CONGRESS**

Transaction ID: 5880

Date of Disbursement

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

Mailing Address PO BOX 92413

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

City ALBUQUERQUE State NM Zip Code 87199

Purpose of Disbursement

|  |
|--|
|  |
|--|

Candidate Name  
**JON BARELA**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  Primary  General  
 Other (specify) ▼

State: NM District: 01

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

|         |
|---------|
| 2000.00 |
|---------|

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

|         |
|---------|
| 2000.00 |
|---------|