

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

HERBALIFE 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 ▲

C C00393298

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer John DeSimone

Signature of Treasurer

John DeSimone

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

HERBALIFE PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 03 / 01 / 2014 To: M M / D D / Y Y Y Y Y 03 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		90886.40
(b) Cash on Hand at Beginning of Reporting Period.....	37026.00	
(c) Total Receipts (from Line 19)	34972.98	36972.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	71998.98	127859.38
7. Total Disbursements (from Line 31)	4687.26	60547.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	67311.72	67311.72
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

HERBALIFE PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
03	/	01	/	2014

To:

M M	/	D D	/	Y Y Y Y
03	/	31	/	2014

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

31869.06

33869.06

(ii) Unitemized

3103.92

3103.92

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

34972.98

36972.98

(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) ►

34972.98

36972.98

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ►

34972.98

36972.98

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

34972.98

36972.98

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	687.26	2047.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	687.26	2047.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	58500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4687.26	60547.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4687.26	60547.66

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	34972.98	36972.98
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34972.98	36972.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	687.26	2047.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	687.26	2047.66

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

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

FOR LINE NUMBER: PAGE 6 OF 15

(check only one)

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

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NAME OF COMMITTEE (In Full)

HERBALIFE PAC

Full Name (Last, First, Middle Initial)

A. Leroy Barnes Jr.

Mailing Address 47 Huntleigh Road

City State Zip Code
 Piedmont CA 94611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 07 / 2014

Transaction ID : 10879

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Carole Black

Mailing Address 9575 Lime Orchard Rd

City State Zip Code
 Beverly Hills CA 90210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : 10889

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Jean Marie Cacciatore

Mailing Address 4208 E. 6th Street

City State Zip Code
 Long Beach CA 90814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP, International HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : 10890

Amount of Each Receipt this Period

2000.00

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

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

6000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 15

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

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NAME OF COMMITTEE (In Full)

HERBALIFE PAC

Full Name (Last, First, Middle Initial)

A. Laura Chacon-Garbato

Mailing Address 2711 West 180th Street

City State Zip Code
Torrance CA 90502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Director Latin Division

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 19 / 2014

Transaction ID : 10885

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

B. Steven Dentali

Mailing Address 916 Knob Hill Ave.

City State Zip Code
Redondo Beach CA 90277

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP, Botanical Sciences

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2014

Transaction ID : 10884

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

C. Mark H Evans

Mailing Address 127 Center Court

City State Zip Code
Danville CA 94506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

SVP - Global Supply Chain & Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : 10891

Amount of Each Receipt this Period

5000.00

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

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

6800.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 15

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

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NAME OF COMMITTEE (In Full)

HERBALIFE PAC

Full Name (Last, First, Middle Initial)

A. Vasilios H Frankos

Mailing Address 205 Via Colusa

City State Zip Code
 Redondo Beach CA 90277

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

SVP Global Regulatory Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.72

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 28 / 2014

Transaction ID : 10930

Amount of Each Receipt this Period

142.86

Full Name (Last, First, Middle Initial)

B. Richard Goudis

Mailing Address 26620 Alsace Drive

City State Zip Code
 Calabasas CA 91302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 28 / 2014

Transaction ID : 10931

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Rodolfo Gratton

Mailing Address 1244 S. Hudson Ave.

City State Zip Code
 Los Angeles CA 90019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 17 / 2014

Transaction ID : 10883

Amount of Each Receipt this Period

1200.00

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

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

1592.86

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

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

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 15

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

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NAME OF COMMITTEE (In Full)

HERBALIFE PAC

Full Name (Last, First, Middle Initial)

A. Thomas Harms

Mailing Address 11528 Decente Drive

City State Zip Code
 Studio City CA 91604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP, World Wide Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.72

Date of Receipt

M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : 10935

Amount of Each Receipt this Period

142.86

Full Name (Last, First, Middle Initial)

B. Gerald T Holly

Mailing Address 835 Hopkins Way
 Apt. 507

City State Zip Code
 Redondo Beach CA 90277

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

SVP Global Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : 10887

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Frank G Lamberti Jr.

Mailing Address 1453 Via Coronel

City State Zip Code
 Palos Verdes Estat CA 90274

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

SVP - Finance & Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : 10941

Amount of Each Receipt this Period

250.00

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

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

3392.86

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 15

(check only one)

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

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NAME OF COMMITTEE (In Full)

HERBALIFE PAC

Full Name (Last, First, Middle Initial)

A. Robert Levy

Mailing Address 2771 Forrester Dr.

City State Zip Code
 Los Angeles CA 90064

FEC ID number of contributing federal political committee.

C

Name of Employer

Herbalife International

Occupation

Sr VP, Worldwide Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.67

Date of Receipt

M M / D D / Y Y Y Y
 03 / 14 / 2014

Transaction ID : 10909

Amount of Each Receipt this Period

266.67

Full Name (Last, First, Middle Initial)

B. Robert Levy

Mailing Address 2771 Forrester Dr.

City State Zip Code
 Los Angeles CA 90064

FEC ID number of contributing federal political committee.

C

Name of Employer

Herbalife International

Occupation

Sr VP, Worldwide Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.34

Date of Receipt

M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : 10942

Amount of Each Receipt this Period

266.67

Full Name (Last, First, Middle Initial)

C. Paul MarloweMailing Address 800 W Olympic Blvd.
#406

City State Zip Code
 Los Angeles CA 90015

FEC ID number of contributing federal political committee.

C

Name of Employer

Herbalife International

Occupation

SVP Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 / 12 / 2014

Transaction ID : 10881

Amount of Each Receipt this Period

3000.00

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

3533.34

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 15

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

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NAME OF COMMITTEE (In Full)

HERBALIFE PAC

Full Name (Last, First, Middle Initial)

A. Bruce J Peters

Mailing Address 9903 Santa Monica Blvd.
#966

City State Zip Code
Los Angeles CA 90212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Sr. VP Distributor Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2014

Transaction ID : 10880

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

B. David Pezzullo

Mailing Address 25514 Oak Savannah Ct.

City State Zip Code
Valencia CA 90015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Executive Vice President, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : 10947

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Casey Vanous

Mailing Address 2650 W. 235th St.
Unit C

City State Zip Code
Torrance CA 90505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

Director, SA Affairs & Sports Nutritio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : 10888

Amount of Each Receipt this Period

600.00

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

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

3850.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 15

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

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NAME OF COMMITTEE (In Full)

HERBALIFE PAC

Full Name (Last, First, Middle Initial)

A. Des Walsh

Mailing Address 2657 Carman Crest Dr

City State Zip Code
 Los Angeles CA 90068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 12 / 2014

Transaction ID : 10882

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Jody Wodrich

Mailing Address 652 N Orchard Dr.

City State Zip Code
 Burbank CA 91506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP Creative Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 10892

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

C. Monica Wood

Mailing Address P.O. Box 11688

City State Zip Code
 Marina Del Rey CA 90295

FEC ID number of contributing
federal political committee.

C

Name of Employer

Herbalife International

Occupation

VP, Consumer Insights

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 19 / 2014

Transaction ID : 10886

Amount of Each Receipt this Period

500.00

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

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

6700.00

31869.06

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

HERBALIFE PAC

A. Union Bank of California

Date of Disbursement

03 / 25 / 2014

Transaction ID : 10895

Category/
Type

Amount of Each Disbursement this Period

687.26

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

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

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

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement this Period

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

Disbursement For:

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

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

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

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement this Period

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

Disbursement For:

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

State: District:

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

687.26

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

687.26

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

PAGE 14 OF 15

<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

Full Name (Last, First, Middle Initial)

A. COMMITTEE FOR HISPANIC CAUSES/BUILDING OUR LEADERSHIP DIVERSITY PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Mailing Address P.O. BOX 70980

City	State	Zip Code
WASHINGTON	DC	20024

Purpose of Disbursement
Political ContributionCandidate Name
COMMITTEE FOR HISPANIC CAUSES/BUILDING OUR LEADERSHIP DIVERSITY PACCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : 10893

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE FOR HISPANIC CAUSES/BUILDING OUR LEADERSHIP DIVERSITY PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Mailing Address P.O. BOX 70980

City	State	Zip Code
WASHINGTON	DC	20024

Purpose of Disbursement
Void Previously Issued CheckCandidate Name
COMMITTEE FOR HISPANIC CAUSES/BUILDING OUR LEADERSHIP DIVERSITY PACCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : 10894

Amount of Each Disbursement this Period

-5000.00

Full Name (Last, First, Middle Initial)

C. PALLONE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Mailing Address P.O. BOX 3176

City	State	Zip Code
LONG BRANCH	NJ	07740

Purpose of Disbursement
Political ContributionCandidate Name
FRANK JR PALLONECategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 06

Transaction ID : 10876

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

PAGE 15 OF 15

<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

Full Name (Last, First, Middle Initial)

A. STEVE ISRAEL FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2014

Mailing Address P.O. BOX 1400

City	State	Zip Code
MELVILLE	NY	11747

Transaction ID : 10877Purpose of Disbursement
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

STEVE J. ISRAELCategory/
Type

2000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 03

Full Name (Last, First, Middle Initial)

B. STRICKLAND FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2014

Mailing Address P.O. BOX 630446

City	State	Zip Code
SIMI VALLEY	CA	93063

Transaction ID : 10878Purpose of Disbursement
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

ANTHONY A STRICKLANDCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 25

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Mailing Address

City	State	Zip Code
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Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

3000.00
4000.00