

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Health Justice PAC

ADDRESS (number and street) 777 S. Figueroa Street #4050

Check if different than previously reported. (ACC) Los Angeles CA 90017

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00621466

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

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <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 type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on M M / D D / Y Y Y Y Y Y in the State of  

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

Election on 11 / 08 / 2016 in the State of CA

5. Covering Period 10 / 01 / 2016 through 11 / 28 / 2016

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

Alexander, Lori, , ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Alexander, Lori, , , [Electronically Filed] Date 12 / 08 / 2016

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**Health Justice PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7333.32"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="0.00"/>	<input type="text" value="21000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7333.32"/>	<input type="text" value="21000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6400.00"/>	<input type="text" value="20066.68"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="933.32"/>	<input type="text" value="933.32"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="2213.87"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

Health Justice PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	21000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	21000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	21000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0.00	21000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	21000.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	166.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	166.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6400.00	19900.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6400.00	20066.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6400.00	20066.68

**DETAILED SUMMARY PAGE**  
of Disbursements

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<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	21000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	21000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	166.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	166.68

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**Health Justice PAC**

**A. Democratic Congressional Campaign Committee**

Full Name (Last, First, Middle Initial)

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement Federal Contribution

Candidate Name **Democratic Congressional Campaign Committee**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2016

FEC Identification Number: C00000935

Transaction ID : VSGDP9TEDI

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Hall for Congress**

Full Name (Last, First, Middle Initial)

Mailing Address 4225 Myrtle Ave

City Long Beach State CA Zip Code 90807-2435

Purpose of Disbursement Federal Contribution

Candidate Name **Hall, Isadore, , , III**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: CA District: 44

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C00497859

Transaction ID : VSGDP9TCZ1

Amount of Each Disbursement this Period: 2700.00

Memo Item

**C. Hillary Victory Fund**

Full Name (Last, First, Middle Initial)

Mailing Address 411 S Main St Ste M100

City Los Angeles State CA Zip Code 90013-1316

Purpose of Disbursement Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2016

FEC Identification Number: C

Transaction ID : VSGDP9TRD

Amount of Each Disbursement this Period: 2700.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6400.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 7 OF 10
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Health Justice PAC**

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

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

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

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

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

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

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 8 OF 10
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Health Justice PAC**

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

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

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

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

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

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

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



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

NAME OF COMMITTEE (In Full)  
**Health Justice PAC**

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

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

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

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : VSEF69H8KG9</b>	
Amount Incurred This Period <input type="text" value="441.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="441.00"/>

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

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : VSEF69H8KH7</b>	
Amount Incurred This Period <input type="text" value="174.63"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="174.63"/>

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

NAME OF COMMITTEE (In Full)  
**Health Justice PAC**

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

Outstanding Balance Beginning This Period		Transaction ID : VSEF69H8KJ5	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
13.96	0.00	13.96	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	13.96
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	2213.87
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	2213.87