

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

FEDERAL ELECTION COMMISSIONS CENTER

2005 MAR -2 A 9:13

1. NAME OF COMMITTEE (or full) TYPE OR PRINT Example: If typing, type over the lines. 122E4M5

Los Angeles African American Women Political Action Committee

ADDRESS (number and street) 3618 South Mulcafield Road Los Angeles CA 90016

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

000365048

3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 10/01/2004 through 12/31/2004

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: CAROLYN TYLER GUIDRY

Signature of Treasurer: Carolyn Tyler Guidry Date: 01/31/2005

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

C00365098

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Los Angeles African American Women Political Action Committee

Report Covering the Period:

From:

10/01/2004

To:

12/31/2004

C00365098

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6 (a) Cash on Hand January 1, 1502		
(b) Cash on Hand at Beginning of Reporting Period 11894.00		
(c) Total Receipts (from Line 19) 710.00		
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 12084.00		
7. Total Disbursements (from Line 31) 6594.00		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) 5490.00		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		



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

00345098

DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

Los Angeles African American Women Political Action Committee

Report Covering the Period

From:

11/01/2004

To:

12/31/2005

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).....		
(ii) Unitemized.....	2,100.00	
(iii) TOTAL (add		
Lines 11(i)(i) and (ii).....▶	2,100.00	
(b) Political Party Committees.....		
(c) Other Political Committees		
(such as PACs).....		
(d) Total Contributions (add Lines		
11(i)(iii), (b), and (c)) (Carry	2,100.00	
Totals to Line 33, page 5).....▶		
12. Transfers From Affiliated/Other		
Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees.....		
17. Other Federal Receipts		
(Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b)).....		
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17 and 18(c)).....▶	2,100.00	
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19).....▶	N/A	

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DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal Election Activity (from Schedule H4)		
(i) Federal Share		
X (ii) Non-Federal Share	1,100,000	
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)	2,100,000	
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements	200,000	
30. Federal Election Activity (2 U.S.C. §491(2)(j))		
(a) Allocated Federal Election Activity (from Schedule H4)		
(i) Federal Share		
(ii) 'Levin' Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 29(d), 29 and 30(c))	6,394,000	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)		

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1 OF 1
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (or Filer) <u>Los Angeles Hispanic American Women Political Action Group</u>	FEC IDENTIFICATION NUMBER <u>000365098</u>
Check <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle initial) of Payee <u>Lori Jones for Judge</u>		
Mailing Address: 		
City 	State 	Zip Code

Date <u>10/26/2004</u>
Amount <u>500.00</u>

Purpose of Expenditure <u>Campaign Contribution</u>	Category Type <u>Contribution</u>
Name of Federal Candidate Supported or Opposed by Expenditure: <u>LORI JONES</u>	
Calendar Year-To-Date Per Election for Office Sought <u>500.00</u>	

Office Sought: <u>N/A</u>	House <input type="checkbox"/>	Senate <input type="checkbox"/>	President <input type="checkbox"/>	State: <u>X</u>	District: <u>X</u>
Check One:	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose			
Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____		

Full Name (Last, First, Middle initial) of Payee <u>MARY ANN ALDRAS for Assembly</u>		
Mailing Address: <u>P.O. Box 2108</u>		
City <u>Palm Springs</u>	State <u>CA</u>	Zip Code <u>92263-9798</u>

Date <u>10/26/2004</u>
Amount <u>500.00</u>

Purpose of Expenditure <u>Campaign Contribution</u>	Category Type <u>Contribution</u>
Name of Federal Candidate Supported or Opposed by Expenditure: <u>MARY ANN ALDRAS</u>	
Calendar Year-To-Date Per Election for Office Sought <u>500.00</u>	

Office Sought:	House <input type="checkbox"/>	Senate <input type="checkbox"/>	President <input type="checkbox"/>	State: <u>X</u>	District: _____
Check One:	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose			
Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Other (specify) _____		

(a) SUBTOTAL of Itemized Independent Expenditures	<u>1000.00</u>
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	<u>1000.00</u>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or if the reporting entity is not a political party (committee) any political party committee or its agent.

Carolyn Tyler Priddy
Signature

Date 01/31/2005

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (in Full) <i>Los Angeles African American Women Political Caucus</i>	FEC IDENTIFICATION NUMBER <i>00365098</i>
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle Initial) of Payor
Marilyn Gladney for Inland City Council

Mailing Address
167 N 3rd Ave, Ste N

City *Inland* State *CA* Zip Code *91786*

Date
10/26/2004

Amount
200.00

Purpose of Expenditure
Campaign Contribution

Category Type

Name of Federal Candidate Supported or Opposed by Expenditure:
N/A

Office Sought: House Senate President

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
200.00

Disbursement For: Primary General
 Other (specify)

Full Name (Last, First, Middle Initial) of Payor
FRIENDS of Trans-Pinkard

Mailing Address
2047 Spyglass Trail East

City *Orange* State *CA* Zip Code *93036*

Date
10/26/2004

Amount
200.00

Purpose of Expenditure
Campaign Contribution

Category Type

Name of Federal Candidate Supported or Opposed by Expenditure:
N/A

Office Sought: House Senate President

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
200.00

Disbursement For: Primary General
 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures	<i>400.00</i>
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature
Marilyn Gladney

Date
10/31/2005

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 01
OF
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (in Full) <i>Los Angeles African American Women Political Action Committee</i>		FEC IDENTIFICATION NUMBER <i>000365098</i>
Check if <input type="checkbox"/> 24-hour notice	<input type="checkbox"/> 48-hour notice	<i>Female</i>

Full Name (Last, First, Middle Initial) of Payee
Friends of Donna Corman for Judge

Mailing Address
555 S Flower St Ste 1450

City *Los Angeles* State *CA* Zip Code *90071*

Date
10/26/2004

Amount
200.00

Purpose of Expenditure
Campaign Contribution

Category Type
Independent

Name of Federal Candidate Supported or Opposed by Expenditure:
Donna Corman

Office Sought: House State Senate District President

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
200.00

Disbursement For: Primary General Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Angela Reddock for City Council

Mailing Address
11301 W Olympic Blvd #2507

City *Los Angeles* State *CA* Zip Code *90067*

Date
10/26/2004

Amount
300.00

Purpose of Expenditure
Campaign Contribution

Category Type
Independent

Name of Federal Candidate Supported or Opposed by Expenditure:
Angela Reddock

Office Sought: House State Senate District President

Check One: *N/A* Support Oppose

Calendar Year-To-Date Per Election for Office Sought
300.00

Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures	<i>700.00</i>
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Christina Taylor-Judy
Signature

Date *10/27/2004*

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
35. Total Contributions (other than loans) (from Line 11(d), page 3)	21,000	
36. Total Contribution Refunds (from Line 22(d))		
37. Net Contributions (other than loans) (subtract Line 36 from Line 35)		
38. Total Federal Operating Expenditures (add Line 21(a)(1) and Line 21(b))		
39. Offsets to Operating Expenditures (from Line 15, page 3)		
40. Net Operating Expenditures (subtract Line 39 from Line 38)		

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input checked="" type="checkbox"/> Postmark illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>SP</i> PREPARER	3/2/05 DATE PREPARED

(5/2004)