PAGE 1 / 9

Image# 201604139012323226

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X   Fo	r Other Than An	Authorized Com	nittee		
I T	YPE OR PRINT ▼				Office Use Only
1. NAME OF TO COMMITTEE (in full)	TPE OR PRINT ¥	over the lin	typing, type es.	12FE4M5	
West Hollywood Democ	ratic Club/Bever	rly Hills Democr	atic Club		
ADDRESS (number and street)	601 N. Roxbury Dr.				
Check if different than previously reported. (ACC)	Beverly Hills			CA L	90210
2. FEC IDENTIFICATION NUM	IBER ▼	CITY 🛦	;	STATE 🛦	ZIP CODE ▲
C C00352211		3. IS THIS REPORT X	NEW (N) <b>OR</b>	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  X 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)	(c) 12-Day PRE-Election Report for th  (d) 30-Day POST-Election Report for th	Convenue: Conven	tion (12C)	Sep 2	in the State of
5. Covering Period 01	01 20	016 throu		31	2016
Corner or Print Name of Transvers	•	est of my knowledge	and belief it is tru	ie, correct and	complete.
Type or Print Name of Treasurer Signature of Treasurer	Lillian Raffel	[Electron	nically Filed]	Date 04	/ DDD / YDY Y Y Y Y Y 2016
NOTE: Submission of false, erroneo	us, or incomplete inforr	mation may subject the	e person signing th	nis Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

O FEC Form 3X (Rev. 02/2003)	F RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name		<del>-</del>
West Hollywood Democratic Club/B	everly Hills Democratic Club	
Report Covering the Period: From: 01	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	: 03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand  January 1,  2016		14298.43
(b) Cash on Hand at  Beginning of Reporting Period	14298.43	
(c) Total Receipts (from Line 19)	0.00	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	14298.43	14298.43
7. Total Disbursements (from Line 31)	1250.00	1250.00
B. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13048.43	13048.43
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	4125.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	8684.50	
This committee has qualified as a multican		
F	or 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)

Write or Type Committee Name

West Hollywood Democratic Club/Beverly Hills Democratic Clu
---

R	eport Covering the Period: From: 01	/ 01 / 2016 To:	03 31 2016
	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	0.00
	(ii) Unitemized(iii) TOTAL (add	0.00	0.00
	Lines 11(a)(i) and (ii)	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
10	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal Candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)  Transfers from Non-Federal and Levin Funds	0.00	0.00
10.	(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
10	Total Descripts (add Lines 11/4)		
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	0.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	0.00	0.00

### **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
<ul> <li>Operating Expenditures: –         <ul> <li>(a) Allocated Federal/Non-Federal</li> </ul> </li> </ul>		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	1250.00	1250.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	1250.00	1250.00
Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Contributions to     Federal Candidates/Committees	0.00	0.00
and Other Political Committees	0.00	0.00
(use Schedule E)	0.00	0.00
. Coordinated Party Expenditures		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Ronaymente Made	0.00	0.00
. Loan Repayments Made	3.55	0.00
. Loans Made	0.00	0.00
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		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00
(add 21100 20(a), (b), and (b),		
O. Other Disbursements	0.00	0.00
F. L. and Filmation Auti its (0.11.0.00404(00))		
. Federal Election Activity (2 U.S.C. §431(20))  (a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(I) III . I G	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	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
Total Dishuraemente (add Lines 01/s) 00		
. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1250.00	1250.00
20, 21, 20, 20, 27, 20(d), 20 and 00(0))	1250.00	1250.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	1.00	
from Line 31)	1250.00	1250.00

### **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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1250.00	1250.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	1250.00	1250.00

ITEMIZED DISBURSEMENTS	I llog congrete cohodulo(a) I	DR LINE NUMBER:       PAGE 6 OF 9         neck only one)       22       23       24       25       26         27       28a       28b       28c       29       30
Any information copied from such Reports and Stater or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  West Hollywood Democratic Club/I	ne and address of any political con	nmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. Crummitt & Associates  Mailing Address 525 E. Seaside Way, #101-C		Date of Disbursement  02 19 2016
City Long Beach Purpose of Disbursement Reporting Services  Candidate Name  Office Sought: House Senate President State: District:	Cate	Transaction ID : EXPB320  Amount of Each Disbursement this Period  egory/ //pe  Memo Item
Full Name (Last, First, Middle Initial)  B.  Mailing Address		Date of Disbursement
City  Purpose of Disbursement  Candidate Name  Office Sought: House Senate President  State: District:	Ty	Amount of Each Disbursement this Period  egory/ //pe  Memo Item
Full Name (Last, First, Middle Initial)  C.  Mailing Address		Date of Disbursement
City  Purpose of Disbursement  Candidate Name  Office Sought: House Disburser		Amount of Each Disbursement this Period egory/

## SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 7 OF 9
FOR LINE 13 OF FORM 3X

<b>LOAN SOURCE</b> Full Name (La Stonewall Democratic Club	st, First, Middle Initial	☐ Men	no Item Election:
			General
Mailing Address 1212 S. Victory	Blvd.		Other (specify) ▼
City Burbank	State C	ZIP Code 91502	
Original Amount of Loan	Cumula	ive Payment To Date	Balance Outstanding at Close of This Peri
	125.00	0.00	125.00
TERMS		Data Dara da	Accord Bate
Date Incurred  M M / D D / Y Y Y Y 200	09	Date Due In None	o.00 % (apr) Secured:  Yes X
List All Endorsers or Guaranto	rs (if any) to Loan S	ource	
1. Full Name (Last, First, Middl	e Initial)	Name of Emplo	pyer
Mailing Address		Occupation	
City	State ZIP Co	Amount de Guaranteed Outstanding:	
2. Full Name (Last, First, Middle	e Initial)	Name of Emplo	pyer
Mailing Address		Occupation	
0	710	Amount	
City	State ZIP Co	de Guaranteed Outstanding:	
3. Full Name (Last, First, Middle	e Initial)	Name of Emplo	pyer
Mailing Address		Occupation	
		Amount	
City	State ZIP Co	de Guaranteed Outstanding:	
4. Full Name (Last, First, Middle	e Initial)	Name of Emplo	pyer
Mailing Address		Occupation	
		Amount	
City	State ZIP Co		
BTOTALS This Period This Pag	e (optional)		125.00

## SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 8 OF 9
FOR LINE 13 OF FORM 3X

Mailing Address 1212 S. Victory Blvd.  City Burbank  City Burbank  City Burbank  City Burbank  Cumulative Payment To Date  Balance Outstanding at Close of This Per  4000.00  TERMS  Date Incurred  Date Due  Interest Rate  Secured:	LOAN SOURCE Full Name (Last, Headquarters Committee of West Holl		☐ Memo Ite	em Election:
City Burbank  State CA ZIP Code 91502  Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This Per  4000.00  Date Due Interest Rate Secured:  10 11 2010  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Tell Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Tell Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Tell Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Tell Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Tell Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Tell Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Tell Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Tell Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Tell Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:		,		1 <u> </u>
Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This Per  4000.00  Date Due  Interest Rate  Secured:  10 11 2010  None  O.00  Secured:  10 2010  Name of Employer  Occupation  Amount Guaranteed Outstanding:  City  State  ZIP Code  Outstanding:  Amount Guaranteed Outstanding:  Tell Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  City  State  ZIP Code  Occupation  Amount Guaranteed Outstanding:  City  State  ZIP Code  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:	Mailing Address 1212 S. Victory Blv	d.		Other (specify)
TERMS Date Incurred Date Due Interest Rate Secured: 10 10 710 72010 Date Due Interest Rate Secured: 10 70 70 70 70 70 70 70 70 70 70 70 70 70	City Burbank	State CA ZI	P Code 91502	
TERMS  Date Incurred  Date Due  Interest Rate  Secured:  1. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  City  State  ZIP Code  Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  City  State  ZIP Code  Outstanding:  Amount Guaranteed Outstanding:  City  State  ZIP Code  Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:	Original Amount of Loan	Cumulative Payme	nt To Date	Balance Outstanding at Close of This Peri
Date Incurred  Date Due Interest Rate  Secured:  10 10 2010 2010 2010 2010 2010 2010 20	4000	0.00	0.00	
List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code Outstanding:  City State ZIP Code Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:		Data	D	at Bata
Name (Last, First, Middle Initial)   Name of Employer	M M / D D / Y Y Y		Y Y Y Y Y	0.00
Mailing Address  City State ZIP Code Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  City State ZIP Code Guaranteed Outstanding:  Name of Employer  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  City State ZIP Code Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  City State ZIP Code Occupation	List All Endorsers or Guarantors	(if any) to Loan Source		
City State ZIP Code Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:	1. Full Name (Last, First, Middle	nitial)	Name of Employer	
City State ZIP Code Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:	Mailing Address		Occupation	
Mailing Address  City State ZIP Code Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  City State ZIP Code Guaranteed Outstanding:	City	State ZIP Code	Guaranteed	
City State ZIP Code  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:	2. Full Name (Last, First, Middle Ir	itial)	Name of Employer	
City State ZIP Code Guaranteed Outstanding:  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Name of Employer  Outstanding:  Name of Employer  Amount Guaranteed Outstanding:  Name of Employer  City State ZIP Code  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:	Mailing Address		Occupation	
Outstanding:  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Amount Guaranteed Outstanding:  City  State  ZIP Code  Amount Guaranteed Outstanding:	0.1	710.0		
Mailing Address  City  State ZIP Code  Guaranteed Outstanding:  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Amount Guaranteed Outstanding:	City	State ZIP Code		
City State ZIP Code Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:	3. Full Name (Last, First, Middle Ir	itial)	Name of Employer	
City State ZIP Code Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:	Mailing Address		Occupation	
Outstanding:  4. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:			1 1110 1111	
4. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:	City	State ZIP Code		9 9
City State ZIP Code Guaranteed Outstanding:	4. Full Name (Last, First, Middle Ir	iitial)	Name of Employer	
City State ZIP Code Guaranteed Outstanding:	Mailing Address		Occupation	
City State ZIP Code Guaranteed Outstanding:			Amount	
BTOTALS This Period This Page (optional)	City	State ZIP Code	Guaranteed	7
BTOTALS This Period This Page (optional)			·	
	BTOTALS This Period This Page	optional)	<b>&gt;</b>	4000.00

### SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE

	9
X	10

OF

NAME OF COMMITTEE (In Full) West Hollywood Democratic Club/Beverly Hills Democratic Club A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailings/Invitations/Booklets/Event Location Raffel Lillian Mailing Address 601 N. Roxbury Dr. State Zip Code Beverly Hills 90210 Transaction ID: PAYD187 Outstanding Balance Beginning This Period 6073.08 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 6073.08 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailer supporting Ted Lieu and Adam Schiff Raffel Lillian for Congress Mailing Address 601 N. Roxbury Dr. City State Zip Code Beverly Hills CA 90210 Outstanding Balance Beginning This Period Transaction ID: PAYD273 2611.42 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2611.42 0.00 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 Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 8684.50 1) SUBTOTALS This Period This Page (optional)..... 8684.50 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 8684.50 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶