

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 728 W. Edna Place  
 Check if different than previously reported. (ACC) Covina CA 91722

2. **FEC IDENTIFICATION NUMBER** ▼ C00557652 CITY ▲ Covina STATE ▲ CA ZIP CODE ▲ STATE ▼ DISTRICT CA 35

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)
  
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

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

Election on 11 / 04 / 2014 in the State of CA

(c) 30-Day **POST**-Election Report for the:

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

Election on  /  /  in the State of

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 2014

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 Yolanda Miranda

Signature of Treasurer Yolanda Miranda *[Electronically Filed]* Date 10 / 22 / 2014

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									
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Norma Torres for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2014 To: M M / D D / Y Y Y Y 10 / 15 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	46533.00	368662.75
(b) Total Contribution Refunds (from Line 20(d)) .....	1000.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	45533.00	367662.75
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	24491.67	263382.61
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4315.85
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	24491.67	259066.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	103049.34	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	3500.00	

**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 3 (Revised 12/2003)

Write or Type Committee Name

**Norma Torres for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15800.00	92231.25
(ii) Unitemized.....	733.00	5431.50
(iii) TOTAL of contributions from individuals ▶	16533.00	97662.75
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	30000.00	271000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	46533.00	368662.75
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	1000.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	1000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	4315.85
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	46533.00	373978.60

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	24491.67	263382.61
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	1000.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	1000.00
20. 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).....	1000.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	1000.00
21. OTHER DISBURSEMENTS .....	0.00	5546.65
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	25491.67	270929.26

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	82008.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	46533.00
25. SUBTOTAL (add Line 23 and Line 24).....	128541.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25491.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	103049.34

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Elisia Abrams**

Mailing Address 2077 Fifth Avenue Apt 4A

City New York State NY Zip Code 10035

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

Name of Employer Willoughby Capital Holdings LLC Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : IDTA159**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA159**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Joel Albers**

Mailing Address 212 W. 91st St #625

City New York State NY Zip Code 10024

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

Name of Employer Zocdoc Occupation Sales Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : IDTA168**

Amount of Each Receipt this Period  
250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : INCA509IDTA168**

Amount of Each Receipt this Period  
250.00

Conduit

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Edward Altabet**

Mailing Address 1 Woodhill Dr

City Maplewood State NJ Zip Code 07040

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

Name of Employer Occupation  
Edward Altabet Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : IDTA158**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA158**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Linda Lee Alter**

Mailing Address 210 W. Rittenhouse Square, #1506

City Philadelphia	State PA	Zip Code 19103-5774
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FEC ID number of contributing federal political committee. **C**

Name of Employer Linda Lee Alter	Occupation Artist
-------------------------------------	----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		08		2014

**Transaction ID : INCA520**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Emily's List Federal Fund**

Mailing Address 1800 M Street, NW Suite 375 N

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3343.42

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		08		2014

**Transaction ID : IDTA171**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Joyce Arad**

Mailing Address 29 Beverly Park Ter

City Beverly Hills	State CA	Zip Code 90210-1563
-----------------------	-------------	------------------------

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

Name of Employer Joyce Arad	Occupation Investments
--------------------------------	---------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2014

**Transaction ID : INCA539**

Amount of Each Receipt this Period  
500.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dmitry Binkevich**

Mailing Address 464 Dongan Hills Ave

City Staten Island State NY Zip Code 10305

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

Name of Employer Citi Markets Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : IDTA161**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA161**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Stephen Botsford**

Mailing Address 20 Clarington Way

City Barrington State IL Zip Code 60010-6932

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

Name of Employer Stephen Botsford Occupation Lawyer / Realestate Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 13 / 2014

**Transaction ID : IDTA170**

Amount of Each Receipt this Period  
2600.00

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

Full Name (Last, First, Middle Initial) <b>ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address 366 Summer Street		<b>Transaction ID : INCA509IDTA170</b>	
City Somerville	State MA	Zip Code 02144-3132	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Occupation		Conduit	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 43078.08	
		<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>Yuval Brokman</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 12 / 2014	
Mailing Address 201 East 87th St., Apt 30P		<b>Transaction ID : IDTA143</b>	
City New York	State NC	Zip Code 10128	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Occupation Credit Suisse Private Banking		Conduit	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 12 / 2014	
Mailing Address 366 Summer Street		<b>Transaction ID : INCA507IDTA143</b>	
City Somerville	State MA	Zip Code 02144-3132	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Occupation		Conduit - Some contributions under \$100	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 43078.08	
		<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	250.00

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

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

FOR LINE NUMBER: PAGE 10 OF 42  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Doron**

Mailing Address 666 Greenwich St., Apt 231

City State Zip Code  
New York NY 10014

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

Name of Employer Occupation  
Goodwin Protector LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2014

**Transaction ID : IDTA166**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City State Zip Code  
Somerville MA 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : INCA509IDTA166**

Amount of Each Receipt this Period  
250.00

Conduit  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Jonathan Etzion**

Mailing Address 15 Henhawk Road

City State Zip Code  
Great Neck NY 11024

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

Name of Employer Occupation  
RXR Realty Financial Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : IDTA149**

Amount of Each Receipt this Period  
250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA149**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Shabnam Farahi**

Mailing Address 4095 Odile Court

City Reno State NV Zip Code 89511

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

Name of Employer Occupation  
June Jacobs Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : IDTA163**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA163**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Adam Gindberg**

Mailing Address 162 Candlewick Lane

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer Occupation  
PWC Accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : IDTA152**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City State Zip Code  
Somerville MA 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : INCA507IDTA152**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Roger Goldberg**

Mailing Address 1427 Greene Ave #2

City State Zip Code  
Brooklyn NY 11237

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

Name of Employer Occupation  
G5 Capital Group LLC Real Estate Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : IDTA144**

Amount of Each Receipt this Period  
250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA144**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Rebecca Goldenberg**

Mailing Address 342 67th St., Apt 8c

City New York State NY Zip Code 10065

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

Name of Employer Occupation  
Blackrock Vice President, Product Development

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : IDTA142**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA142**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mickey Ibarra**

Mailing Address 1140 Connecticut Ave NW Suite 110

City Washington State DC Zip Code 20036

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

Name of Employer Ibarra Strategy Group Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : IDTA181**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : INCA509IDTA181**

Amount of Each Receipt this Period  
1000.00

Conduit  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Bruce P. Jeffer**

Mailing Address 1900 Avenue of the Stars, 7th FL.

City Los Angeles State CA Zip Code 90067

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 10 / 2014

**Transaction ID : INCA540**

Amount of Each Receipt this Period  
300.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sarah Jonas**

Mailing Address 2373 Broadway Apt 1402

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
Weil Gotshal Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : IDTA151**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City State Zip Code  
Somerville MA 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : INCA507IDTA151**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Kirschbaum**

Mailing Address 545 Eashington Ave #603

City State Zip Code  
Brooklyn NY 11238

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

Name of Employer Occupation  
Kauf McGuire & Margolis Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : IDTA145**

Amount of Each Receipt this Period  
250.00

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 16 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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)  
**Norma Torres for Congress**

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA145**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey Leacox**

Mailing Address 27035 Country Club Cir.

City Davis State CA Zip Code 95618

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

Name of Employer Occupation  
Greenberg Traurig Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : IDTA182**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : INCA509IDTA182**

Amount of Each Receipt this Period  
500.00

Conduit

**[MEMO ITEM]**

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Addie Lerner**

Mailing Address 88 Leonard St

City State Zip Code  
New York NY 10013

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

Name of Employer Occupation  
General Atlantic Privacy Equity

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : IDTA150**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City State Zip Code  
Somerville MA 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : INCA507IDTA150**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Malekan , Melody**

Mailing Address 134 1st Ave #7

City State Zip Code  
New York NY 10009

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

Name of Employer Occupation  
Malachite Group LTD Real Estate Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : IDTA160**

Amount of Each Receipt this Period  
250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA160**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Marcelo Messer**

Mailing Address 230 West 87th St

City New York State NY Zip Code 10024

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

Name of Employer Occupation  
Rothschild, Inc Investment Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : IDTA162**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA162**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Miller**

Mailing Address 1521 Alton Road, Suite 527

City	State	Zip Code
Miami Beach	FL	33139

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

Name of Employer	Occupation
Catalyst Mutual	Portfolio Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : IDTA154**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City	State	Zip Code
Somerville	MA	02144-3132

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

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA154**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Jason Morganroth**

Mailing Address 192 Elizabeth St. 3R

City	State	Zip Code
New York	NY	10012

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

Name of Employer	Occupation
Arbor	Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : IDTA153**

Amount of Each Receipt this Period  
250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA153**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Hirsch Neustein**

Mailing Address 323 W. 96th St. PH14

City New York State NY Zip Code 10025

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

Name of Employer Occupation  
Mountain Development Corporation Corporate Counsel

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : IDTA155**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA155**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 21 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Finbarr J. O'Neil**

Mailing Address 1604 Sycamore Canyon Dr.

City State Zip Code  
Westlake Village CA 91361

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

Name of Employer Occupation  
J.D. Power President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 13 / 2014

**Transaction ID : INCA535**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Faisal Qazi**

Mailing Address 1240 West Valencia Mesa Drive

City State Zip Code  
Fullerton CA 92833

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

Name of Employer Occupation  
Inland Neurological Consultants, Inc Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : IDTA164**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 366 Summer Street

City State Zip Code  
Somerville MA 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA164**

Amount of Each Receipt this Period  
1000.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

Full Name (Last, First, Middle Initial) <b>A. Benjamin Rodkin</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 12 / 2014	
Mailing Address 546 B Plainview Rd.		<b>Transaction ID : IDTA157</b>	
City Plainview	State NY	Zip Code 11803	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer JP Morgan Chase & Co.	Occupation Finance		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 12 / 2014	
Mailing Address 366 Summer Street		<b>Transaction ID : INCA507IDTA157</b>	
City Somerville	State MA	Zip Code 02144-3132	Amount of Each Receipt this Period _____ 250.00 Conduit - Some contributions under \$100 <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee.		C _____	
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 43078.08		

Full Name (Last, First, Middle Initial) <b>C. Daniel Rosenberg</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 12 / 2014	
Mailing Address 240 W. 98th St., Apt 14G		<b>Transaction ID : IDTA147</b>	
City New York	State NY	Zip Code 10025	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Daniel Rosenberg	Occupation Real Estate		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 750.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Norma Torres for Congress**

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**43078.08**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 12 / 2014**

**Transaction ID : INCA507IDTA147**

Amount of Each Receipt this Period  
**500.00**

Conduit - Some contributions under \$100

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth Ruby**

Mailing Address 11845 West Olympic Blvd., Suite 12

City Los Angeles State CA Zip Code 90064

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

Name of Employer Occupation  
**Kenneth A Ruby Company** Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : INCA557**

Amount of Each Receipt this Period  
**300.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kenneth Ruby**

Mailing Address 11845 West Olympic Blvd., Suite 12

City Los Angeles State CA Zip Code 90064

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

Name of Employer Occupation  
**Kenneth A Ruby Company** Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 10 / 2014**

**Transaction ID : INCA538**

Amount of Each Receipt this Period  
**300.00**

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

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

**600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Theodore Samets**

Mailing Address 88 Leonard St, #314

City State Zip Code  
New York NY 10013

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

Name of Employer Occupation  
Clearly Gottlieb Law Clerk

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : IDTA148**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City State Zip Code  
Somerville MA 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 12 / 2014

**Transaction ID : INCA507IDTA148**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Catherine Samuels**

Mailing Address 11 Althea Lane

City State Zip Code  
Larchmont NY 10538

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

Name of Employer Occupation  
N/A None

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 05 / 2014

**Transaction ID : IDTA177**

Amount of Each Receipt this Period  
250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Emily's List Federal Fund**

Mailing Address 1800 M Street, NW Suite 375 N

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3343.42**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 09 / 2014

**Transaction ID : INCA524IDTA177**

Amount of Each Receipt this Period  
 250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Jennifer Silverman**

Mailing Address 11601 Wilshire Blvd., Suite 1840

City Los Angeles State CA Zip Code 90025

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 10 / 2014

**Transaction ID : INCA536**

Amount of Each Receipt this Period  
 1300.00

**C.** Full Name (Last, First, Middle Initial)  
**Andrew Weiss**

Mailing Address 158 Fieldpoint Dr

City Irvington State NM Zip Code 10533

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

Name of Employer Occupation  
PWC Accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : IDTA156**

Amount of Each Receipt this Period  
 250.00

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

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

**1550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA156**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Evan Weiss**

Mailing Address 1118 Cambridge Road

City Teaneck State NJ Zip Code 07666

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

Name of Employer Occupation  
LW Hospitality Advisors Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : IDTA146**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 12 / 2014

**Transaction ID : INCA507IDTA146**

Amount of Each Receipt this Period  
250.00

Conduit - Some contributions under \$100

**[MEMO ITEM]**

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jared White**

Mailing Address 305 East 86th St. 17 JW

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
Stillwater Real Estate and Property Gr Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2014

**Transaction ID : IDTA167**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 366 Summer Street

City State Zip Code  
Somerville MA 02144-3132

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43078.08

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : INCA509IDTA167**

Amount of Each Receipt this Period  
250.00

Conduit  
**[MEMO ITEM]**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

15800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Nurses Assoc. (ANA-PAC)**

Mailing Address 8515 Georgia Ave., Suite 400

City State Zip Code  
Silver Spring MD 20910

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 03 / 2014

**Transaction ID : INCA470**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Blue Shield of CA**

Mailing Address 50 Beale Street

City State Zip Code  
San Francisco CA 94105

FEC ID number of contributing federal political committee. **C** C00340364

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 10 / 2014

**Transaction ID : INCA492**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Comcast Corporation & NBC Universal PAC**

Mailing Address One Comcast Center  
1701 JFK Blvd

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 08 / 2014

**Transaction ID : INCA494**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Committee to Re-Elect Loretta Sanchez**

Mailing Address P.O. Box 6037

City Santa Ana State CA Zip Code 92706

FEC ID number of contributing federal political committee. **C** C00326264

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : INCA477**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Committee to Re-Elect Loretta Sanchez**

Mailing Address P.O. Box 6037

City Santa Ana State CA Zip Code 92706

FEC ID number of contributing federal political committee. **C** C00326264

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : INCA521**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**DRIVE Committee**

Mailing Address 25 Louisiana Ave. NW

City Washington State DC Zip Code 20001-2198

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : INCA476**

Amount of Each Receipt this Period  
5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dutch PAC**

Mailing Address 499 S. Capitol St. SW, Ste. 422

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing federal political committee. **C** C00448001

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : INCA475**

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**International Paper PAC**

Mailing Address 1101 Pennsylvania Ave., NW, Suite

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 09 / 2014

**Transaction ID : INCA489**

Amount of Each Receipt this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jobs Opportunities & Education PAC**

Mailing Address 700 13th Street, NW, Suite 600

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing federal political committee. **C** C00362384

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : INCA522**

Amount of Each Receipt this Period

1500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Levin For Congress**

Mailing Address P. O. Box 37

City State Zip Code  
Roseville MI 48066-0037

FEC ID number of contributing federal political committee. **C** C00156612

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 06 / 2014

**Transaction ID : INCA474**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**LIUNA PAC**

Mailing Address 905 16th Street, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 08 / 2014

**Transaction ID : INCA526**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Macy's Inc. The Retailers Assoc.**

Mailing Address 611 Olive Street, Suite 1750

City State Zip Code  
Saint Louis MO 63101

FEC ID number of contributing federal political committee. **C** C00144311

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 09 / 2014

**Transaction ID : INCA490**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Molina Healthcare, Inc.**

Mailing Address 200 Oceangate, Suite 100

City Long Beach State CA Zip Code 90802

FEC ID number of contributing federal political committee. **C** C00430256

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : INCA523**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Pallone for Congress**

Mailing Address 495 Broadway

City Long Branch State NJ Zip Code 07740

FEC ID number of contributing federal political committee. **C** C00226928

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 03 / 2014

**Transaction ID : INCA471**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**PG&E Corporation Employees Energy PAC**

Mailing Address 77 Beale Street

City San Francisco State CA Zip Code 94177

FEC ID number of contributing federal political committee. **C** C00177469

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 09 / 2014

**Transaction ID : INCA488**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 33 OF 42  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Professional Engineers in CA Gov't Federal PAC**

Mailing Address 555 Capitol Mall, Ste. 1425

City Sacramento State CA Zip Code 95814

FEC ID number of contributing federal political committee. **C** C00459800

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 10 / 2014

**Transaction ID : INCA493**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**SEIU COPE**

Mailing Address 1800 Massachusetts Ave. NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 07 / 2014

**Transaction ID : INCA487**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

6000.00

30000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 42	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 267.72 <b>Transaction ID : EXPB508</b>
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Processing fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 197.52 <b>Transaction ID : EXPB527</b>
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Processing fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Austin/Egoscue Development</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 4225 Myrtle Ave.		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : EXPB483</b>
City Long Beach State CA Zip Code 90807	Purpose of Disbursement Fundraising consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5465.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 42	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bistro Bistro</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 2268 Foothill Blvd		Amount of Each Disbursement this Period 552.50
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Meeting	Transaction ID : EXPB559
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Megan Egoscue</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 4225 Myrtle Ave.		Amount of Each Disbursement this Period 596.03
City Long Beach	State CA	
Zip Code 90807	Purpose of Disbursement Reimbursement for flights for campaign purposes	Transaction ID : EXPB566
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 4333 Amon Carter Blvd		Amount of Each Disbursement this Period 596.03
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement 09/11/14 RT Flight for one staff memeber from Ontario to Dallas for campaign purposes	Transaction ID : PDTB6EXPB566
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1148.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 42	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kalik &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 10291 Arizona Circle		Amount of Each Disbursement this Period 73.78 <b>Transaction ID : EXPB514</b>
City Bethesda	State MD	
Zip Code 20817	Purpose of Disbursement Database expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Kalik &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 10291 Arizona Circle		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : EXPB512</b>
City Bethesda	State MD	
Zip Code 20817	Purpose of Disbursement Fundraising consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. John Mendoza</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 1602 N. Park Ave.		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : EXPB504</b>
City Pomona	State CA	
Zip Code 91768	Purpose of Disbursement Campaign Worker	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4273.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 42		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

Full Name (Last, First, Middle Initial) <b>A. SG&amp;A Campaigns, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 600 PLayerhouse Alley, Suite 504		Amount of Each Disbursement this Period 10000.00 <b>Transaction ID : EXPB480</b>
City Pasadena State CA Zip Code 91101	Purpose of Disbursement General campaign consultant 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 1455 Market Street		Amount of Each Disbursement this Period 12.53 <b>Transaction ID : EXPB572</b>
City San Francisco State CA Zip Code 94103	Purpose of Disbursement Cab fare 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Voter News Letter</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 15021 Ventura Blvd., #530		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : EXPB517</b>
City Sherman Oaks State CA Zip Code 91403	Purpose of Disbursement Slate Mailer 006 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12012.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 42	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

Full Name (Last, First, Middle Initial) <b>A. Yolanda Miranda and Associates, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2014</b>	
Mailing Address <b>728 W. Edna Place</b>			Amount of Each Disbursement this Period <b>1500.00</b>	
City <b>Covina</b>	State <b>CA</b>	Zip Code <b>91722</b>	Transaction ID : <b>EXPB564</b>	
Purpose of Disbursement <b>Accounting and reporting services</b>		Category/Type <b>001</b>		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/Type		
Candidate Name				
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) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/Type		
Candidate Name				
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: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>24400.08</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 42	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

Full Name (Last, First, Middle Initial) <b>A. Committee to Re-Elect Loretta Sanchez</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2014</b>
Mailing Address P.O. Box 6037		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : EXPB568</b>
City <b>Santa Ana</b>	State <b>CA</b>	
Zip Code <b>92706</b>		Category/ Type <b>010</b>
Purpose of Disbursement <b>Refund contribution</b>		
Candidate Name <b>Loretta Sanchez</b>		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/ Type
Candidate Name		
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) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/ Type
Candidate Name		
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:

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1000.00</b>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Norma Torres for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Austin/Egoscue Development</b>	Nature of Debt (Purpose): Fundraising consulting
Mailing Address 4225 Myrtle Ave.	
City State Zip Code Long Beach CA 90807	

Outstanding Balance Beginning This Period 5000.00	<b>Transaction ID : PAYD469</b>	
Amount Incurred This Period 0.00	Payment This Period 5000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Megan Egoscue</b>	Nature of Debt (Purpose): Reimbursement for flights for campaign purposes
Mailing Address 4225 Myrtle Ave.	
City State Zip Code Long Beach CA 90807	

Outstanding Balance Beginning This Period 596.03	<b>Transaction ID : PAYD519</b>	
Amount Incurred This Period 0.00	Payment This Period 596.03	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kalik &amp; Associates, Inc.</b>	Nature of Debt (Purpose): Fundraising consulting
Mailing Address 10291 Arizona Circle	
City State Zip Code Bethesda MD 20817	

Outstanding Balance Beginning This Period 3000.00	<b>Transaction ID : PAYD510</b>	
Amount Incurred This Period 0.00	Payment This Period 3000.00	Outstanding Balance at Close of This Period 0.00

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

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Norma Torres for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Kalik & Associates, Inc.**

Nature of Debt (Purpose):  
Database expenses

Mailing Address 10291 Arizona Circle

City State Zip Code  
Bethesda MD 20817

Outstanding Balance Beginning This Period

73.78

Transaction ID : PAYD511

Amount Incurred This Period

0.00

Payment This Period

73.78

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Marshall Arts Creative Services, Inc.**

Nature of Debt (Purpose):  
Printing

Mailing Address 9616 Highland Gorge Drive

City State Zip Code  
Beverly Hills CA 90210

Outstanding Balance Beginning This Period

3500.00

Transaction ID : PAYD91

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**John Mendoza**

Nature of Debt (Purpose):  
Campaign Worker

Mailing Address 1602 N. Park Ave.

City State Zip Code  
Pomona CA 91768

Outstanding Balance Beginning This Period

1200.00

Transaction ID : PAYD460

Amount Incurred This Period

0.00

Payment This Period

1200.00

Outstanding Balance at Close of This Period

0.00

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

3500.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Norma Torres for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Voter News Letter**

Mailing Address 15021 Ventura Blvd., #530

City State Zip Code  
Sherman Oaks CA 91403

Nature of Debt (Purpose):  
Slate Mailer

Outstanding Balance Beginning This Period **Transaction ID : PAYD516**  
2000.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 2000.00 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Yolanda Miranda and Associates, Inc.**

Mailing Address 728 W. Edna Place

City State Zip Code  
Covina CA 91722

Nature of Debt (Purpose):  
Accounting and reporting services

Outstanding Balance Beginning This Period **Transaction ID : PAYD485**  
1500.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 1500.00 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

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) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	3500.00
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) ▶	3500.00