

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED

2014 OCT 16 AM 11:39
Office Use Only

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

12FE4M5 MAIL CENTER

WEST L.A. DEMOCRATIC CLUB

ADDRESS (number and street) ▼

P.O. BOX 8

Check if different than previously reported. (ACC)

VENICE

CA

90294-0008

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00407007

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on [] / [] / [] in the State of []

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

Election on [] / [] / [] in the State of []

5. Covering Period

07 / 01 / 2014

through

09 / 30 / 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 SUSAN BLANCHARD

Signature of Treasurer

Susan Blanchard

Date

10 / 14 / 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

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WEST L.A. DEMOCRATIC CLUB

Report Covering the Period:

From:

To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="1,108,904"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8,508.03"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="59,144.9"/>	<input type="text" value="1,172,208"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="14,522.52"/>	<input type="text" value="22,812.97"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6,456.8"/>	<input type="text" value="14,846.39"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7,965.68"/>	<input type="text" value="7,965.68"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

WEST L.A. DEMOCRATIC CLUB

Report Covering the Period: From: MM ' DD ' YYYY 07 ' 01 ' 2014

To: MM ' DD ' YYYY 09 ' 30 ' 2014

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

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

1,235.00

1,235.00

(ii) Unitemized.....

467.949

1,038.803

(iii) TOTAL (add
Lines 11(a)(i) and (ii)).....▶

591.449

1,172.303

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

591.449

1,172.303

12. Transfers From Affiliated/Other
Party Committees.....

0.00

0.00

13. All Loans Received.....

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....

0.00

0.00

17. Other Federal Receipts
(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5).....

0.00

0.00

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

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

591.449

1,172.303

20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶

591.449

1,172.303

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2,356.83	1,074.638
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2,356.83	1,074.638
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4,000.00	4,000.00
24. Independent Expenditures (use Schedule E).....	0	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0.00
26. Loan Repayments Made.....	0	0.00
27. Loans Made.....	0	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0.00
(b) Political Party Committees	0	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity. (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6,356.83	14,246.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6,356.83	14,246.38

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)					PAGE 1 OF 3
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17	
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16		

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)
WEST LA. DEMOCRATIC CLUB

Full Name (Last, First, Middle Initial)
A. HORTON, JEROME

Mailing Address
P.O. Box 90932

City **LOS ANGELES** State **CA** Zip Code **90009**

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

Name of Employer **CA STATE BOARD OF EQUAL** Occupation **CHAIRMAN**

Receipt For:
 Primary General
 Other (specify) **CONTRIB. TO CLUB**

Date of Receipt
07 / 23 / 2014

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. VAN ECKERT, INGRID

Mailing Address
401 CALIFORNIA AVE.

City **SANTA MONICA** State **CA** Zip Code **9040**

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

Name of Employer **BLUE SHIELD** Occupation **MANAGER**

Receipt For:
 Primary General
 Other (specify) **SUMMER PARTY CONTRIB.**

Date of Receipt
08 / 25 / 2014

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
C. KENNEL, DEBORAH

Mailing Address
1250 NORMAN PLACE

City **LOS ANGELES** State **CA** Zip Code **90049**

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

Name of Employer Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) **SUMMER PARTY CONTRIB.**

Date of Receipt
09 / 02 / 2014

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) **725.00**

TOTAL This Period (last page this line number only) **725.00**

FORM 3X (11-13-13)

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)					PAGE <u>2</u> OF <u>3</u>
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
WEST L.A. DEMOCRATIC CLUB

Full Name (Last, First, Middle Initial)
A. BURKE, AUTUMN

Mailing Address
1970 MANDEVILLE CANYON

City **LOS ANGELES** State **CA** Zip Code **90049**

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

Name of Employer **CANDIDATE** Occupation **STATE ASSEMBLY**

Receipt For:
 Primary General
 Other (specify) **SUMMER PARTY CONTRIB**

Aggregate Year-to-Date

Date of Receipt **09 / 14 / 2014**

Amount of Each Receipt this Period **1050.00**

Full Name (Last, First, Middle Initial)
B. DROBNY, KIM

Mailing Address
632 11th STREET

City **SANTA MONICA** State **CA** Zip Code **90402**

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

Name of Employer **TCCFC** Occupation **ACCOUNTANT**

Receipt For:
 Primary General
 Other (specify) **SUMMER PARTY CONTRIB**

Aggregate Year-to-Date

Date of Receipt **09 / 14 / 2014**

Amount of Each Receipt this Period **1000.00**

Full Name (Last, First, Middle Initial)
C. SCHWAB, LISA

Mailing Address
3516 CORNITH

City **LOS ANGELES** State **CA** Zip Code

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

Name of Employer **CANTALINIS** Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) **SUMMER PARTY CONTRIB**

Aggregate Year-to-Date

Date of Receipt **09 / 14 / 2014**

Amount of Each Receipt this Period **1050.00**

SUBTOTAL of Receipts This Page (optional) **3100.00**

TOTAL This Period (last page this line number only)

4-11-14 11:21 AM

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

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

FOR LINE NUMBER: PAGE **3** OF **3**

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

WEST L.A. DEMOCRATIC CLUB

Full Name (Last, First, Middle Initial)

A. ROSENDAHL, BILL

Mailing Address

3715 WASATCH

City

MAR VISTA

State

CA

Zip Code

90066

FEC ID number of contributing federal political committee.

C

Date of Receipt

09 / 08 / 2014

Amount of Each Receipt this Period

200.00

Name of Employer

Occupation

RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

SUMMER PARTY CONTRIB

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Date of Receipt

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Date of Receipt

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

200.00

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

1,235.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 6

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

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NAME OF COMMITTEE (In Full)

WEST L.A. DEMOCRATIC CLUB

Full Name (Last, First, Middle Initial)

A. <u>WILLIS, KELLY</u> Mailing Address <u>1631 SHELL AVE</u> City <u>VENICE</u> State <u>CA</u> Zip Code <u>90291</u>		Date of Disbursement <u>07</u> / <u>10</u> / <u>2014</u>
Purpose of Disbursement <u>TECH. EQUIP.</u> Candidate Name		Amount of Each Disbursement this Period <u>36.03</u>
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) ▼	Category/Type <u>001</u>
State: _____ District: _____		

B. <u>ST BEDES CHURCH</u> Mailing Address <u>3590 GRAND VIEW BLVD.</u> City <u>MAR VISTA</u> State <u>CA</u> Zip Code		Date of Disbursement <u>07</u> / <u>20</u> / <u>2014</u>
Purpose of Disbursement <u>VENUE RENTAL</u> Candidate Name		Amount of Each Disbursement this Period <u>1,000.00</u>
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) ▼	Category/Type <u>001</u>
State: _____ District: _____		

C. <u>ACT BLUE</u> Mailing Address <u>366 SUMMER STREET 7</u> City <u>SOMMERVILLE</u> State <u>MA</u> Zip Code <u>02144-3132</u>		Date of Disbursement <u>07</u> / <u>14</u> / <u>2014</u>
Purpose of Disbursement <u>DONATION-MONTHLY</u> Candidate Name		Amount of Each Disbursement this Period <u>10.00</u>
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) ▼	Category/Type <u>011</u>
State: _____ District: _____		

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

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

146.03

FORM 101-10110

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)				PAGE <u>3</u> OF <u>6</u>					
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
WEST L.A. DEMOCRATIC CLUB

A. Full Name (Last, First, Middle Initial) BAIL, ALAN

Mailing Address 1931 LAWLER AVE

City MAR VISTA State CA Zip Code

Purpose of Disbursement SUMMER PARTY EXPENSES Category/Type 0.03

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 08 / 2014

Amount of Each Disbursement this Period 700.00

B. Full Name (Last, First, Middle Initial) MARR, JON

Mailing Address

City State Zip Code

Purpose of Disbursement SUMMER PARTY EXPENSES Category/Type 0.03

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 14 / 2014

Amount of Each Disbursement this Period 73.55

C. Full Name (Last, First, Middle Initial) COREY, MATT

Mailing Address

City State Zip Code

Purpose of Disbursement SUMMER PARTY - BBQ CHEF Category/Type 0.03

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 14 / 2014

Amount of Each Disbursement this Period 1,100.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1,873.55

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

FORM 1111 - 11/11

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)							PAGE <u>5</u> OF <u>6</u>			
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
WEST L.A. DEMOCRATIC CLUB

A.

Full Name (Last, First, Middle Initial) FRIENDS OF MARY LANDRIEU

Mailing Address 700 13TH STREET NW, SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement CAMPAIGN CONTRIBUTION

Candidate Name MARY LANDRIEU

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement 09 / 26 / 2014

Amount of Each Disbursement this Period 1,000.00

Category/Type 011

B.

Full Name (Last, First, Middle Initial) MARK PRYOR FOR U.S. SENATE

Mailing Address P.O. Box 2720

City LITTLE ROCK State AR Zip Code 72204

Purpose of Disbursement CAMPAIGN CONTRIBUTION

Candidate Name MARK PRYOR

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement 09 / 26 / 2014

Amount of Each Disbursement this Period 500.00

Category/Type 011

C.

Full Name (Last, First, Middle Initial) BRALEY FOR IOWA

Mailing Address P.O. Box 856

City DES MOINES State IA Zip Code 50304

Purpose of Disbursement CAMPAIGN CONTRIBUTION

Candidate Name BRUCE BRALEY

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement 09 / 26 / 2014

Amount of Each Disbursement this Period 500.00

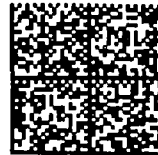
Category/Type 011

SUBTOTAL of Disbursements This Page (optional).....▶ 2,000.00

TOTAL This Period (last page this line number only).....▶ 2,000.00

1001-1111-11014

E



U.S. POSTAGE
\$19.99
PME 2-DAY
90034 0007
Date of sale
10/14/14
06 2S00 APC
08805777

PRIORITY MAIL EXPRESS 2-DAY™

WAIVER OF SIGNATURE REQUESTED
SCHEDULED DELIVERY 10/16/2014

0 lb. 2.80 oz.

SHIP
TO:

0007

WASHINGTON DC 20463



* E W 3 7 1 8 0 0 4 0 0 U S *

POSTAL USE ONLY

Date In: Mo.	Day	Year	Time In:	<input type="checkbox"/> AM
				<input type="checkbox"/> PM
Day of Delivery:	<input type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> 10:30AM	<input type="checkbox"/> Noon
			<input type="checkbox"/> 3PM	
Return Receipt	Sched DelDate	10/16/2014	Additional Insurance Fee	

DOMESTIC AND INTERNATIONAL
FACE MAILING LABEL HERE

WHEN
A C
LAE

PRIORITY®
★ MAIL ★



VISIT US AT USPS.COM®
ORDER FREE SUPPLIES ONLINE

FROM: *BLANCHARD*
3729 mentone Ave.
L.A, CA 90034

TO: *FEC*
999 E STREET NW
WASHINGTON, D.C
20463

Label 228, July 2013

FOR DOMESTIC AND INTERNATIONAL USE

APO/FPO/DPO, and select International
usps.com for complete details.

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This packaging is the property of the U.S. Postal Service® and is provided solely for use in sending Priority Mail Express® shipments. Misuse may

Please

PRESS FIRMLY TO SEAL

NOV 11 11:11 AM '14

OCT 16 10:11:39

FEC MAIL CENTER

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked 10/14/14
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

DEP
 PREPARER
 (8/2013)

10/16/14
 DATE PREPARED

UNCLASIFIED