

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

HERBALIFE PAC

ADDRESS (number and street) 990 West 190th Street

Check if different than previously reported. (ACC) Torrance CA 90502

2. FEC IDENTIFICATION NUMBER CITY STATE ZIPCODE

C00393298

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: (b) Monthly Report Due On:

(a) Quarterly Reports:

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

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12G)

Election on in the State of

- (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on in the State of

5. Covering Period 09 01 2009 through 09 30 2009

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 Richard Goudis

Signature of Treasurer Electronically Filed by Richard Goudis Date 10 16 2009

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

Table with 7 columns and 1 row for Office Use Only.

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
HERBALIFE PAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		43833.14
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	48959.96									
(c) Total Receipts (from Line 19) .....	5534.82	62161.64								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	54494.78	105994.78								
7. Total Disbursements (from Line 31) .....	4000.00	55500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	50494.78	50494.78								
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) .....	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
HERBALIFE PAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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) .....	4982.65	49953.12
(ii) Unitemized .....	552.17	12208.52
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	5534.82	62161.64
(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) .....	5534.82	62161.64
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 Transfer (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)) .....	5534.82	62161.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5534.82	62161.64

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	55500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	4000.00	55500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4000.00	55500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	5534.82	62161.64
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5534.82	62161.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 37  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
HERBALIFE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Hal Apple</p> <p>Mailing Address 1550 Cliftonville Avenue</p> <p>City State Zip Code <u>Los Angeles</u> CA 90025</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Herbalife      Occupation: Creative Director</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">342.84</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 04 / 2009</span></p> <p><b>Transaction ID:</b> 4277</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">28.57</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Hal Apple</p> <p>Mailing Address 1550 Cliftonville Avenue</p> <p>City State Zip Code <u>Los Angeles</u> CA 90025</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Herbalife      Occupation: Creative Director</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">371.41</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 18 / 2009</span></p> <p><b>Transaction ID:</b> 4406</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">28.57</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Ezra Bejar</p> <p>Mailing Address P O Box 57</p> <p>City State Zip Code <u>Spring Valley</u> CA 90262</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Herbalife International      Occupation: VP - Scientific Affairs</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">550.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 04 / 2009</span></p> <p><b>Transaction ID:</b> 4278</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">107.14</span>
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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 7 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ezra Bejar		Date of Receipt MM / DD / YYYY 09 / 18 / 2009		
	Mailing Address P O Box 57		<b>Transaction ID:</b> 4405		
	City Spring Valley	State CA	Zip Code 90262	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Herbalife International	Occupation VP - Scientific Affairs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Olga Bergstrom		Date of Receipt MM / DD / YYYY 09 / 04 / 2009		
	Mailing Address 3553 Emerald Street #103		<b>Transaction ID:</b> 4279		
	City TORRANCE	State CA	Zip Code 90503	Amount of Each Receipt this Period 23.81	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Herbalife International	Occupation Director, Internet Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.72			

<b>C.</b>	Full Name (Last, First, Middle Initial) Olga Bergstrom		Date of Receipt MM / DD / YYYY 09 / 18 / 2009		
	Mailing Address 3553 Emerald Street #103		<b>Transaction ID:</b> 4404		
	City TORRANCE	State CA	Zip Code 90503	Amount of Each Receipt this Period 23.81	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Herbalife International	Occupation Director, Internet Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 309.53			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	97.62
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 8 / 37  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.** Full Name (Last, First, Middle Initial)  
James Berklas  
 Mailing Address 867 W Mountain Street  
 City State Zip Code  
 Glendale CA 91202  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 04 / 2009  
**Transaction ID: 4280**  
 Amount of Each Receipt this Period  
 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife Occupation VP & Asst. Corp. Secretary  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

**B.** Full Name (Last, First, Middle Initial)  
James Berklas  
 Mailing Address 867 W Mountain Street  
 City State Zip Code  
 Glendale CA 91202  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2009  
**Transaction ID: 4403**  
 Amount of Each Receipt this Period  
 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife Occupation VP & Asst. Corp. Secretary  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

**C.** Full Name (Last, First, Middle Initial)  
Giovanni Bohorquez  
 Mailing Address 11 Pacret Road  
 City State Zip Code  
 RANCHO PALOS VERDE CA 90275  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 04 / 2009  
**Transaction ID: 4281**  
 Amount of Each Receipt this Period  
 23.81  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation Director, SAM Distribution Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.72

**SUBTOTAL** of Receipts This Page (optional) ..... ► 123.81  
**TOTAL** This Period (last page this line number only) ..... ►



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 9 / 37</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Giovanni Bohorquez		Date of Receipt	
	Mailing Address 11 Pacret Road		M M / D D / Y Y Y Y Y 09 / 18 / 2009	
	City	State	Zip Code	<b>Transaction ID: 4402</b>
	RANCHO PALOS VERDE	CA	90275	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		23.81	
Name of Employer Herbalife International		Occupation Director, SAM Distribution Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 309.53		

<b>B.</b>	Full Name (Last, First, Middle Initial) Robyn M. Browning		Date of Receipt	
	Mailing Address 3847 Hepburn Avenue		M M / D D / Y Y Y Y Y 09 / 04 / 2009	
	City	State	Zip Code	<b>Transaction ID: 4282</b>
	Los Angeles	CA	90008	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		23.81	
Name of Employer Herbalife		Occupation Executive Director Family Foundation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.72		

<b>C.</b>	Full Name (Last, First, Middle Initial) Robyn M. Browning		Date of Receipt	
	Mailing Address 3847 Hepburn Avenue		M M / D D / Y Y Y Y Y 09 / 18 / 2009	
	City	State	Zip Code	<b>Transaction ID: 4401</b>
	Los Angeles	CA	90008	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		23.81	
Name of Employer Herbalife		Occupation Executive Director Family Foundation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 309.53		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>71.43</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# 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 10 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<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)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Sandra Calloway		Date of Receipt
	Mailing Address 5709 Carfax Avenue		<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Lakewood	CA	90713
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Herbalife International		Occupation Dir., Global Customs Ops. Compliance	Transaction ID: 4284
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="285.72"/>	<input type="text" value="23.81"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Sandra Calloway		Date of Receipt
	Mailing Address 5709 Carfax Avenue		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Lakewood	CA	90713
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Herbalife International		Occupation Dir., Global Customs Ops. Compliance	Transaction ID: 4399
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="309.53"/>	<input type="text" value="23.81"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Brett R. Chapman		Date of Receipt
	Mailing Address 5054 Royal Vista Court		<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Thousand Oaks	CA	91362
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Herbalife International		Occupation General Counsel	Transaction ID: 4285
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1100.00"/>	<input type="text" value="100.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="147.62"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 37

(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Brett R. Chapman

Mailing Address 5054 Royal Vista Court

City State Zip Code  
Thousand Oaks CA 91362

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

Name of Employer Occupation  
Herbalife International General Counsel

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 8 / 2 0 0 9

Transaction ID: 4398

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Bosco Chiu

Mailing Address 990 West 190th Street  
Suite 650

City State Zip Code  
Torrance CA 90502

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 4 / 2 0 0 9

Transaction ID: 4286

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Bosco Chiu

Mailing Address 990 West 190th Street  
Suite 650

City State Zip Code  
Torrance CA 90502

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 8 / 2 0 0 9

Transaction ID: 4397

Amount of Each Receipt this Period  
25.00

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

150.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 37  
(check only one)

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

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)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial) Cristian Dates		Date of Receipt MM / DD / YYYY 09 / 18 / 2009
Mailing Address 18316 Hatteras Street No. 15		Transaction ID: 4394
City Tarzana	State Zip Code CA 91356	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer Herbalife International	Occupation Director	Aggregate Year-to-Date ▼ 210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) John Desimone		Date of Receipt MM / DD / YYYY 09 / 04 / 2009
Mailing Address 6100 DeSoto Avenue Apt. 636		Transaction ID: 4290
City Woodland Hills	State Zip Code CA 91367	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.24
Name of Employer Herbalife International	Occupation SVP - Finance	Aggregate Year-to-Date ▼ 1142.88
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**C.**

Full Name (Last, First, Middle Initial) John Desimone		Date of Receipt MM / DD / YYYY 09 / 18 / 2009
Mailing Address 6100 DeSoto Avenue Apt. 636		Transaction ID: 4393
City Woodland Hills	State Zip Code CA 91367	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.24
Name of Employer Herbalife International	Occupation SVP - Finance	Aggregate Year-to-Date ▼ 1238.12
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	260.48
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**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 13 / 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Steve Edgcombe	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 2320 Gillingham Circle	<b>Transaction ID:</b> 4291
	City State Zip Code Thousand Oaks CA 91362	Amount of Each Receipt this Period 47.62
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife International Director, Global Compensation Operatio	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 571.44	

<b>B.</b>	Full Name (Last, First, Middle Initial) Steve Edgcombe	Date of Receipt MM / DD / YYYY 09 / 18 / 2009
	Mailing Address 2320 Gillingham Circle	<b>Transaction ID:</b> 4392
	City State Zip Code Thousand Oaks CA 91362	Amount of Each Receipt this Period 47.62
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife International Director, Global Compensation Operatio	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 619.06	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Goudis	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 26620 Alsace Drive	<b>Transaction ID:</b> 4294
	City State Zip Code Calabasas CA 91302	Amount of Each Receipt this Period 190.48
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2285.76	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	285.72
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 37

(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Richard Goudis

Mailing Address 26620 Alsace Drive

City State Zip Code  
Calabasas CA 91302

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

Name of Employer Occupation  
Herbalife CFO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2476.24

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2009

Transaction ID: 4389

Amount of Each Receipt this Period

190.48

**B.**

Full Name (Last, First, Middle Initial)  
Anthony Granger

Mailing Address 448 West Fairview Blvd.

City State Zip Code  
Inglewood CA 90302

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

Name of Employer Occupation  
Herbalife International Director, Global Transportation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.72

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2009

Transaction ID: 4295

Amount of Each Receipt this Period

23.81

**C.**

Full Name (Last, First, Middle Initial)  
Anthony Granger

Mailing Address 448 West Fairview Blvd.

City State Zip Code  
Inglewood CA 90302

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

Name of Employer Occupation  
Herbalife International Director, Global Transportation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 309.53

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2009

Transaction ID: 4388

Amount of Each Receipt this Period

23.81

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

238.10

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 37

(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Paul R. Greenberg

Mailing Address 703 North Oakhurst Drive

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Occupation  
Herbalife International Sr. Council Legal Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 384.65

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2009

Transaction ID: 4296

Amount of Each Receipt this Period

76.93

**B.**

Full Name (Last, First, Middle Initial)  
Paul R. Greenberg

Mailing Address 703 North Oakhurst Drive

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Occupation  
Herbalife International Sr. Council Legal Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 461.58

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2009

Transaction ID: 4387

Amount of Each Receipt this Period

76.93

**C.**

Full Name (Last, First, Middle Initial)  
Lance J. Harding

Mailing Address 930 North Doheny Drive  
#107

City State Zip Code  
West Hollywood CA 90069

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

Name of Employer Occupation  
Herbalife Sr. Director Nutritional Product Licen

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 242.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2009

Transaction ID: 4297

Amount of Each Receipt this Period

22.00

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

175.86

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 37  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lance J. Harding

Mailing Address 930 North Doheny Drive  
#107

City State Zip Code  
West Hollywood CA 90069

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

Name of Employer Occupation  
Herbalife Sr. Director Nutritional Product Licen

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2009

**Transaction ID: 4386**

Amount of Each Receipt this Period  
22.00

**B.**

Full Name (Last, First, Middle Initial)  
Edi Hienrich

Mailing Address 3657 Sapphire Drive

City State Zip Code  
Encino CA 91436

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

Name of Employer Occupation  
HerbaLife International VP International Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 571.44

Date of Receipt  
MM / DD / YYYY  
09 / 04 / 2009

**Transaction ID: 4299**

Amount of Each Receipt this Period  
47.62

**C.**

Full Name (Last, First, Middle Initial)  
Edi Hienrich

Mailing Address 3657 Sapphire Drive

City State Zip Code  
Encino CA 91436

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

Name of Employer Occupation  
HerbaLife International VP International Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 619.06

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2009

**Transaction ID: 4385**

Amount of Each Receipt this Period  
47.62

**SUBTOTAL** of Receipts This Page (optional) ..... ► **117.24**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 37  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Jennifer Hienrich

Mailing Address 3657 Sapphire Drive

City Encino State CA Zip Code 91436

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

Name of Employer Herbalife International Occupation VP - WW Distributor Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 428.58

Date of Receipt: 09 / 04 / 2009  
**Transaction ID: 4298**  
 Amount of Each Receipt this Period: 47.62

**B.**

Full Name (Last, First, Middle Initial)  
Jennifer Hienrich

Mailing Address 3657 Sapphire Drive

City Encino State CA Zip Code 91436

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

Name of Employer Herbalife International Occupation VP - WW Distributor Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 476.20

Date of Receipt: 09 / 18 / 2009  
**Transaction ID: 4384**  
 Amount of Each Receipt this Period: 47.62

**C.**

Full Name (Last, First, Middle Initial)  
Lenard E. Kasang

Mailing Address 331 Wisconsin Avenue

City Long Beach State CA Zip Code 90814

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

Name of Employer Herbalife Occupation VP - R&D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 09 / 04 / 2009  
**Transaction ID: 4302**  
 Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **145.24**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 37  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lenard E. Kasang

Mailing Address 331 Wisconsin Avenue

City State Zip Code  
Long Beach CA 90814

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

Name of Employer: Herbalife Occupation: VP - R&D

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: MM / DD / YYYY  
09 / 18 / 2009

**Transaction ID: 4381**

Amount of Each Receipt this Period: 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Lyon Kassab

Mailing Address 1271 Stoner Avenue #205

City State Zip Code  
Los Angeles CA 90025

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

Name of Employer: HerbaLife International Occupation: Sr Dir Sales Stragey

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 428.52

Date of Receipt: MM / DD / YYYY  
09 / 04 / 2009

**Transaction ID: 4303**

Amount of Each Receipt this Period: 35.71

**C.**

Full Name (Last, First, Middle Initial)  
Lyon Kassab

Mailing Address 1271 Stoner Avenue #205

City State Zip Code  
Los Angeles CA 90025

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

Name of Employer: HerbaLife International Occupation: Sr Dir Sales Stragey

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 464.23

Date of Receipt: MM / DD / YYYY  
09 / 18 / 2009

**Transaction ID: 4380**

Amount of Each Receipt this Period: 35.71

**SUBTOTAL** of Receipts This Page (optional) ..... ► **121.42**

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

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

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

FOR LINE NUMBER: PAGE 19 / 37  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

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

Mailing Address 990 W 190th Street

City Torrance State CA Zip Code 90502

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

Name of Employer Herbalife Occupation Dir - Supply Chain Planning

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 09 / 04 / 2009  
**Transaction ID: 4304**  
 Amount of Each Receipt this Period: 25.00

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

Mailing Address 990 W 190th Street

City Torrance State CA Zip Code 90502

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

Name of Employer Herbalife Occupation Dir - Supply Chain Planning

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 18 / 2009  
**Transaction ID: 4379**  
 Amount of Each Receipt this Period: 25.00

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

Mailing Address 4469 Via Marina #209

City Marina Rel Rey State CA Zip Code 90292

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

Name of Employer Herbalife International Occupation Director

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 09 / 04 / 2009  
**Transaction ID: 4305**  
 Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 37  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial) Fumiko Kimura		Date of Receipt MM / DD / YYYY 09 / 18 / 2009
Mailing Address 4469 Via Marina #209		<b>Transaction ID:</b> 4378
City Marina Rel Rey	State CA	Zip Code 90292
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Herbalife International	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**B.**

Full Name (Last, First, Middle Initial) Yuen Fan Vanita Kwan		Date of Receipt MM / DD / YYYY 09 / 04 / 2009
Mailing Address 2800 S. Western Avenue #333		<b>Transaction ID:</b> 4306
City SAN PEDRO	State CA	Zip Code 90732
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 35.00
Name of Employer Herbalife	Occupation Sr. Dir - Int'l Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

**C.**

Full Name (Last, First, Middle Initial) Yuen Fan Vanita Kwan		Date of Receipt MM / DD / YYYY 09 / 18 / 2009
Mailing Address 2800 S. Western Avenue #333		<b>Transaction ID:</b> 4377
City SAN PEDRO	State CA	Zip Code 90732
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 35.00
Name of Employer Herbalife	Occupation Sr. Dir - Int'l Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	95.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) John Latini	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 4733 Villa Marina Way Unit D	<b>Transaction ID:</b> 4308
	City Marina del rey State CA Zip Code 90266	Amount of Each Receipt this Period 33.33
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Herbalife International Occupation Sr Dir Tax Compliance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 399.96	

<b>B.</b>	Full Name (Last, First, Middle Initial) John Latini	Date of Receipt MM / DD / YYYY 09 / 18 / 2009
	Mailing Address 4733 Villa Marina Way Unit D	<b>Transaction ID:</b> 4375
	City Marina del rey State CA Zip Code 90266	Amount of Each Receipt this Period 33.33
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Herbalife International Occupation Sr Dir Tax Compliance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 433.29	

<b>C.</b>	Full Name (Last, First, Middle Initial) Margaret Launzel-Pennes	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 2130 Patricia Avenue	<b>Transaction ID:</b> 4309
	City Los Angeles State CA Zip Code 90025	Amount of Each Receipt this Period 47.62
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Herbalife Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 571.44	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>114.28</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 22 / 37  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.** Full Name (Last, First, Middle Initial)  
Margaret Launzel-Pennes

Mailing Address 2130 Patricia Avenue

City State Zip Code  
Los Angeles CA 90025

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

Name of Employer: Herbalife   Occupation: Vice President

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 619.06

Date of Receipt: 09 / 18 / 2009  
Transaction ID: 4374  
Amount of Each Receipt this Period: 47.62

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

Mailing Address 20901 Gorgovia Street

City State Zip Code  
Woodland Hills CA 91364

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

Name of Employer: Herbalife International   Occupation: Director

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 230.82

Date of Receipt: 09 / 18 / 2009  
Transaction ID: 4373  
Amount of Each Receipt this Period: 38.47

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

Mailing Address 10584 Bradbury Road

City State Zip Code  
Los Angeles CA 90064

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

Name of Employer: Herbalife International   Occupation: Sr VP, Americas Operations

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

Date of Receipt: 09 / 04 / 2009  
Transaction ID: 4311  
Amount of Each Receipt this Period: 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 286.09

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 37  
(check only one)

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

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)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Robert Levy

Mailing Address 10584 Bradbury Road

City State Zip Code  
Los Angeles CA 90064

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

Name of Employer Occupation  
Herbalife International Sr VP, Americas Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2009

**Transaction ID: 4372**

Amount of Each Receipt this Period  
200.00

**B.**

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

Mailing Address 242 Market Street

City State Zip Code  
Venice CA 90921

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

Name of Employer Occupation  
Herbalife International Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 526.30

Date of Receipt  
MM / DD / YYYY  
09 / 04 / 2009

**Transaction ID: 4313**

Amount of Each Receipt this Period  
52.63

**C.**

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

Mailing Address 242 Market Street

City State Zip Code  
Venice CA 90921

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

Name of Employer Occupation  
Herbalife International Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 578.93

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2009

**Transaction ID: 4370**

Amount of Each Receipt this Period  
52.63

**SUBTOTAL** of Receipts This Page (optional) ..... ► **305.26**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Deborah Lujan		Date of Receipt
	Mailing Address 13709 Grider Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 04 / 2009
	City	State	Zip Code
	Hawthorne	CA	90250
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 4314
Name of Employer Herebalife International		Occupation Director, Compensation & Benefits	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Deborah Lujan		Date of Receipt
	Mailing Address 13709 Grider Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 18 / 2009
	City	State	Zip Code
	Hawthorne	CA	90250
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 4369
Name of Employer Herebalife International		Occupation Director, Compensation & Benefits	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael W. McKee		Date of Receipt
	Mailing Address 808 Cranebrook Avenue #844		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 04 / 2009
	City	State	Zip Code
	Torrance	CA	90503
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 4315
Name of Employer Herbalife International		Occupation VP U.S. Sales & Communications	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 76.93
		<input type="text"/> 384.65	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 126.93
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 37  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
HERBALIFE PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael W. McKee

Mailing Address 808 Cranebrook Avenue  
#844

City Torrance State CA Zip Code 90503

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

Name of Employer Herbalife International Occupation VP U.S. Sales & Communications

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 461.58

Date of Receipt: 09 / 18 / 2009  
**Transaction ID: 4368**  
 Amount of Each Receipt this Period: 76.93

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

Mailing Address 2573 Goodview Drive

City Germantown State TN Zip Code 38139

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

Name of Employer Herbalife Occupation Sr Director, Distribution

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 09 / 04 / 2009  
**Transaction ID: 4318**  
 Amount of Each Receipt this Period: 50.00

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

Mailing Address 2573 Goodview Drive

City Germantown State TN Zip Code 38139

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

Name of Employer Herbalife Occupation Sr Director, Distribution

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 18 / 2009  
**Transaction ID: 4365**  
 Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 176.93

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

**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 26 / 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Martin Ott	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 2594 Armstrong Avenue	<b>Transaction ID:</b> 4321
	City State Zip Code Los Angeles CA 90039	Amount of Each Receipt this Period 23.81
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife Dir-Distributor Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.72	

<b>B.</b>	Full Name (Last, First, Middle Initial) Martin Ott	Date of Receipt MM / DD / YYYY 09 / 18 / 2009
	Mailing Address 2594 Armstrong Avenue	<b>Transaction ID:</b> 4362
	City State Zip Code Los Angeles CA 90039	Amount of Each Receipt this Period 23.81
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife Dir-Distributor Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.53	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bruce J. Peters	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 9903 Santa Monica Blvd. #966	<b>Transaction ID:</b> 4322
	City State Zip Code Beverly Hills CA 90212	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife Sr. VP Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	127.62
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 37

(check only one)

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

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)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Bruce J. Peters

Mailing Address 9903 Santa Monica Blvd.  
#966

City State Zip Code  
Beverly Hills CA 90212

FEC ID number of contributing federal political committee. C

Name of Employer  
Herbalife

Occupation  
Sr. VP Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
560.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2009

**Transaction ID:** 4361

Amount of Each Receipt this Period  
80.00

**B.**

Full Name (Last, First, Middle Initial)  
David Pezzullo

Mailing Address 25936 Vermouth Court

City State Zip Code  
Stevenson Ranch CA 91381

FEC ID number of contributing federal political committee. C

Name of Employer  
HERBALIFE

Occupation  
Senior VP Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1142.88

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 04 / 2009

**Transaction ID:** 4323

Amount of Each Receipt this Period  
95.24

**C.**

Full Name (Last, First, Middle Initial)  
David Pezzullo

Mailing Address 25936 Vermouth Court

City State Zip Code  
Stevenson Ranch CA 91381

FEC ID number of contributing federal political committee. C

Name of Employer  
HERBALIFE

Occupation  
Senior VP Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1238.12

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2009

**Transaction ID:** 4360

Amount of Each Receipt this Period  
95.24

**SUBTOTAL** of Receipts This Page (optional) ..... 270.48

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 37  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Alan A Quan</p> <p>Mailing Address 941 Calle Canta</p> <p>City State Zip Code GLENDALE CA 91208</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Herbalife      Occupation: Director</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">275.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 04 / 2009</span></p> <p><b>Transaction ID:</b> 4324</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Alan A Quan</p> <p>Mailing Address 941 Calle Canta</p> <p>City State Zip Code GLENDALE CA 91208</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Herbalife      Occupation: Director</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 18 / 2009</span></p> <p><b>Transaction ID:</b> 4359</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) William M Rahn</p> <p>Mailing Address 800 W Olympic Blvd Suite 406</p> <p>City State Zip Code Los Angeles CA 90015</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Herbalife      Occupation: SR VO APAC</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1100.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 04 / 2009</span></p> <p><b>Transaction ID:</b> 4325</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p>
--	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">150.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 37  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial) William M Rahn		Date of Receipt MM / DD / YYYY 09 / 18 / 2009
Mailing Address 800 W Olympic Blvd Suite 406		<b>Transaction ID:</b> 4358
City Los Angeles	State Zip Code CA 90015	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Herbalife	Occupation SR VO APAC	Aggregate Year-to-Date ▼ 1200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) J. Silvia Ramirez		Date of Receipt MM / DD / YYYY 09 / 04 / 2009
Mailing Address 23326 Sesame Street		<b>Transaction ID:</b> 4326
City Torrance	State Zip Code CA 90502	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Herbalife International	Occupation Sr. Dir - Distribution Operations	Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**C.**

Full Name (Last, First, Middle Initial) J. Silvia Ramirez		Date of Receipt MM / DD / YYYY 09 / 18 / 2009
Mailing Address 23326 Sesame Street		<b>Transaction ID:</b> 4357
City Torrance	State Zip Code CA 90502	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Herbalife International	Occupation Sr. Dir - Distribution Operations	Aggregate Year-to-Date ▼ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**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 30 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Roxane O. Romans	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 3919 Latigo Canyon Road	<b>Transaction ID:</b> 4328
	City Malibu State CA Zip Code 90265	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Herbalife International Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Roxane O. Romans	Date of Receipt MM / DD / YYYY 09 / 18 / 2009
	Mailing Address 3919 Latigo Canyon Road	<b>Transaction ID:</b> 4355
	City Malibu State CA Zip Code 90265	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Herbalife International Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Patti Sabel	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 522 Hillgreen Drive	<b>Transaction ID:</b> 4329
	City Beverly Hills State CA Zip Code 90212	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Herbalife International Occupation VP, Assistant Chief Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Patti Sabel	Date of Receipt MM / DD / YYYY 09 / 18 / 2009
	Mailing Address 522 Hillgreen Drive	<b>Transaction ID:</b> 4354
	City State Zip Code Beverly Hills CA 90212	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife International VP, Assistant Chief Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Kenneth J. Simon	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 3513 Elm Avenue	<b>Transaction ID:</b> 4332
	City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 52.63
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife International Vice President - Worldwide Taxation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 526.30	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kenneth J. Simon	Date of Receipt MM / DD / YYYY 09 / 18 / 2009
	Mailing Address 3513 Elm Avenue	<b>Transaction ID:</b> 4351
	City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 52.63
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife International Vice President - Worldwide Taxation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 578.93	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	130.26
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 37  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Chuck Sperazza

Mailing Address 320 N. Franciscan Avenue

City Redondo Beach State CA Zip Code 90277

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

Name of Employer Herbalife Occupation SVP/CIO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	4	/	2	0	0	9

**Transaction ID:** 4334

Amount of Each Receipt this Period 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Chuck Sperazza

Mailing Address 320 N. Franciscan Avenue

City Redondo Beach State CA Zip Code 90277

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

Name of Employer Herbalife Occupation SVP/CIO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	8	/	2	0	0	9

**Transaction ID:** 4349

Amount of Each Receipt this Period 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Diane Turpin

Mailing Address 257 S. Pickett Street #402

City Alexandria State VA Zip Code 22304

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

Name of Employer Herbalife International Occupation Sr. Dir. Gov't Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	4	/	2	0	0	9

**Transaction ID:** 4335

Amount of Each Receipt this Period 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **135.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Diane Turpin	Date of Receipt MM / DD / YYYY 09 / 18 / 2009
	Mailing Address 257 S. Pickett Street #402	<b>Transaction ID:</b> 4348
	City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife International Sr. Dir. Gov't Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) John P. Venardos	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 448 32nd Street	<b>Transaction ID:</b> 4336
	City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 38.10
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife International VP W.W. Regulatory & Gov't Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 457.20	

<b>C.</b>	Full Name (Last, First, Middle Initial) John P. Venardos	Date of Receipt MM / DD / YYYY 09 / 18 / 2009
	Mailing Address 448 32nd Street	<b>Transaction ID:</b> 4347
	City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 38.10
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Herbalife International VP W.W. Regulatory & Gov't Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.30	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	111.20
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**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 34 / 37		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Timothy M. Waters		Date of Receipt
	Mailing Address 2400 Harriman Lane		<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Redonodo Beach	CA	90278
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: 4338</b>
Name of Employer Herbalife International		Occupation Sr. Director, Pricing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="571.44"/>	<input type="text" value="47.62"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Timothy M. Waters		Date of Receipt
	Mailing Address 2400 Harriman Lane		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Redonodo Beach	CA	90278
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: 4344</b>
Name of Employer Herbalife International		Occupation Sr. Director, Pricing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="619.06"/>	<input type="text" value="47.62"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Andrew Weisel		Date of Receipt
	Mailing Address 16857 Roosevelt Lane		<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Huntington Beach	CA	92649
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: 4339</b>
Name of Employer Herbalife		Occupation Dir -Strategic Services	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="571.44"/>	<input type="text" value="47.62"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="142.86"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 37  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

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

Mailing Address 16857 Roosevelt Lane

City State Zip Code  
Huntington Beach CA 92649

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

Name of Employer Occupation  
Herbalife Dir -Strategic Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 619.06

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2009

**Transaction ID:** 4345

Amount of Each Receipt this Period  
47.62

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

Mailing Address 10737 Kelmore Street

City State Zip Code  
Culver City CA 90230

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

Name of Employer Occupation  
Herbalife International VP, Treasurer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 485.76

Date of Receipt  
MM / DD / YYYY  
09 / 04 / 2009

**Transaction ID:** 4340

Amount of Each Receipt this Period  
40.48

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

Mailing Address 10737 Kelmore Street

City State Zip Code  
Culver City CA 90230

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

Name of Employer Occupation  
Herbalife International VP, Treasurer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 526.24

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2009

**Transaction ID:** 4343

Amount of Each Receipt this Period  
40.48

**SUBTOTAL** of Receipts This Page (optional) ..... ► **128.58**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
HERBALIFE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Zimmer		Date of Receipt
	Mailing Address 4911 Avenida Osiaste		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 04 / 2009
	City	State	Zip Code
	Tarzana	CA	91356
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: 4341</b>
Name of Employer HerbaLife		Occupation SVP & Managing Director - NA	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1142.88	<input type="text"/> 95.24

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas Zimmer		Date of Receipt
	Mailing Address 4911 Avenida Osiaste		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 18 / 2009
	City	State	Zip Code
	Tarzana	CA	91356
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: 4342</b>
Name of Employer HerbaLife		Occupation SVP & Managing Director - NA	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1238.12	<input type="text"/> 95.24

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 190.48
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 4982.65

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)  
HERBALIFE PAC

A.	Full Name (Last, First, Middle Initial) BLUMENAUER FOR CONGRESS	Transaction ID: 4410 Date of Disbursement
	Mailing Address 830 NE Holladay, #105	<input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Portland State OR Zip Code 97232	Amount of Each Disbursement this Period
	Purpose of Disbursement <input type="text"/>	<input type="text" value="2000.00"/>
	Candidate Name EARL BLUMENAUER	Category/Type <input type="text"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) EVAN BAYH COMMITTEE	Transaction ID: 4409 Date of Disbursement
	Mailing Address 850 FT WAYNE AVENUE	<input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="2009"/>
	City INDIANAPOLIS State IN Zip Code 46204	Amount of Each Disbursement this Period
	Purpose of Disbursement <input type="text"/>	<input type="text" value="1000.00"/>
	Candidate Name EVAN BAYH	Category/Type <input type="text"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF JASON CHAFFETZ	Transaction ID: 4411 Date of Disbursement
	Mailing Address 175 S. West Temple Suite 650	<input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Salt Lake City State UT Zip Code 84101	Amount of Each Disbursement this Period
	Purpose of Disbursement <input type="text"/>	<input type="text" value="1000.00"/>
	Candidate Name JASON CHAFFETZ	Category/Type <input type="text"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="4000.00"/>