

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

WESTSIDE DEMOCRATIC HQ FEDERAL

ADDRESS (number and street) 249 E. OCEAN BLVD. SUITE 685

Check if different than previously reported. (ACC)

LONG BEACH

CA

90802

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00673590

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:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

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

Election on [MM] / [DD] / [YYYY] in the State of [ ]

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

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period

[MM] / [DD] / [YYYY] through [MM] / [DD] / [YYYY]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Gould, David L., , ,

Type or Print Name of Treasurer

Signature of Treasurer

Gould, David L., , ,

[Electronically Filed]

Date

[MM] / [DD] / [YYYY]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**WESTSIDE DEMOCRATIC HQ FEDERAL**

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="2019"/>		7036.36
(b) Cash on Hand at Beginning of Reporting Period.....	4824.08	
(c) Total Receipts (from Line 19) .....	14859.32	16264.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	19683.40	23300.68
7. Total Disbursements (from Line 31).....	2671.63	6288.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	17011.77	17011.77
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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**WESTSIDE DEMOCRATIC HQ FEDERAL**

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

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).....	8045.00	8045.00
(ii) Unitemized .....	4314.32	4594.32
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	12359.32	12639.32
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	3500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	14859.32	16139.32
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	125.00
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)).....▶	14859.32	16264.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	14859.32	16264.32

**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 .....	2631.63	5248.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2631.63	5248.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40.00	40.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	1000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	2671.63	6288.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2671.63	6288.91

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	14859.32	16139.32
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14859.32	15139.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2631.63	5248.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2631.63	5248.91

**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 6 OF 27
	<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	

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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Cagliata, Rosanna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2922 South Bentley Avenue  
 City Los Angeles State CA Zip Code 90064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Perl Mortgage Occupation (for Individual) Loan Processor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 14 / 2019  
**Transaction ID : IDTA1120**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Actblue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 441146  
 City Somerville State MA Zip Code 02144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12313.20

Date of Receipt 07 / 14 / 2019  
**Transaction ID : INCA932IDTA1120**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Wishon, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3018 McConnell Dr.  
 City Los Angeles State CA Zip Code 90064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 30 / 2019  
**Transaction ID : INCA941**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<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 7 OF 27
	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Devermont, Derek, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 515 Ocean Avenue

City Santa Monica	State CA	Zip Code 90402
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Devermont And Devermont	Occupation (for Individual) Attorney
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2019

**Transaction ID : IDTA1123**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Actblue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2019

**Transaction ID : INCA938IDTA1123**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Cagliata, Rosanna, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2922 South Bentley Avenue

City Los Angeles	State CA	Zip Code 90064
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Perl Mortgage	Occupation (for Individual) Loan Processor
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2019

**Transaction ID : IDTA1130**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.00
<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 8 OF 27
	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Actblue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2019

**Transaction ID : INCA947IDTA1130**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. Cagliata, Rosanna, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2922 South Bentley Avenue

City Los Angeles	State CA	Zip Code 90064
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Perl Mortgage	Occupation (for Individual) Loan Processor
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2019

**Transaction ID : IDTA1133**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. Actblue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2019

**Transaction ID : INCA953IDTA1133**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20.00
<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 9 OF 27
	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Klein, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1032 Enchanted Way  
 City Pacific Palisades State CA Zip Code 90272  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 02 / 2019  
**Transaction ID : IDTA1136**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Actblue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 441146  
 City Somerville State MA Zip Code 02144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12313.20

Date of Receipt 10 / 06 / 2019  
**Transaction ID : INCA959IDTA1136**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Wishon, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3018 McConnell Dr.  
 City Los Angeles State CA Zip Code 90064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 11 / 2019  
**Transaction ID : INCA961**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<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 10 OF 27
	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Cagliata, Rosanna, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2922 South Bentley Avenue

City Los Angeles	State CA	Zip Code 90064
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Perl Mortgage	Occupation (for Individual) Loan Processor
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2019

**Transaction ID : IDTA1137**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. Actblue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2019

**Transaction ID : INCA962IDTA1137**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. Wishon, Jane, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3018 McConnell Dr.

City Los Angeles	State CA	Zip Code 90064
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) None	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2019

**Transaction ID : IDTA1138**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	520.00
<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 11 OF 27
	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Actblue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		31		2019

**Transaction ID : INCA965IDTA1138**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Shephard, Robin, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10347 Monte Mar Dr

City Los Angeles	State CA	Zip Code 90064
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) None	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		08		2019

**Transaction ID : IDTA1164**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Actblue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		10		2019

**Transaction ID : INCA967IDTA1164**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<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 12 OF 27
<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Thom, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7900 Nardian Way  
 City Westchester State CA Zip Code 90045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 08 / 2019**  
**Transaction ID : IDTA1165**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Actblue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 441146  
 City Somerville State MA Zip Code 02144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12313.20

Date of Receipt **11 / 10 / 2019**  
**Transaction ID : INCA967IDTA1165**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Rosenstein, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 302 Amalfi Drive  
 City Santa Monica State CA Zip Code 90402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Intex Solutions, Inc. Occupation (for Individual) Business  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 09 / 2019**  
**Transaction ID : IDTA1159**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<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 13 OF 27
	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Actblue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		10		2019

**Transaction ID : INCA967IDTA1159**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Muller, Duane, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5826 Seahorse Court

City Playa Vista	State CA	Zip Code 90094
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UCLA	Occupation (for Individual) Government Affairs
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		10		2019

**Transaction ID : IDTA1149**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Actblue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		10		2019

**Transaction ID : INCA967IDTA1149**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<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 14 OF 27
	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Actblue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		17		2019

**Transaction ID : INCA971**

Amount of Each Receipt this Period  
4395.00

Memo Item

**B. Cagliata, Rosanna, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2922 South Bentley Avenue

City Los Angeles	State CA	Zip Code 90064
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Perl Mortgage	Occupation (for Individual) Loan Processor
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		14		2019

**Transaction ID : IDTA1212**

Amount of Each Receipt this Period  
20.00

Memo Item

**C. Rodriguez, Nicolas, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5343 Virginia Avenue, #15

City Los Angeles	State CA	Zip Code 90029
---------------------	-------------	-------------------

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

Name of Employer (for Individual) U.S. Senator Barbara Boxer	Occupation (for Individual) Congressional Aide
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		14		2019

**Transaction ID : IDTA1187**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4395.00
<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 15 OF 27
	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Soloff, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 337 14th Street

City Santa Monica	State CA	Zip Code 90402
----------------------	-------------	-------------------

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

Name of Employer (for Individual) munger tolles & oloson llp	Occupation (for Individual) attorney
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2019

**Transaction ID : IDTA1178**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Devermont, Derek, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 515 Ocean Avenue

City Santa Monica	State CA	Zip Code 90402
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Devermont And Devermont	Occupation (for Individual) Attorney
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2019

**Transaction ID : IDTA1215**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Actblue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 24 / 2019

**Transaction ID : INCA975IDTA1215**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<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 16 OF 27
<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Kesden, Bradley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 507 Almar Avenue  
 City Pacific Palisades State CA Zip Code 90272  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Writer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 21 / 2019  
**Transaction ID : IDTA1213**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Actblue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 441146  
 City Somerville State MA Zip Code 02144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 12313.20

Date of Receipt 11 / 24 / 2019  
**Transaction ID : INCA975IDTA1213**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Cagliata, Rosanna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2922 South Bentley Avenue  
 City Los Angeles State CA Zip Code 90064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Perl Mortgage Occupation (for Individual) Loan Processor  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 14 / 2019  
**Transaction ID : IDTA1239**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	520.00
<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 17 OF 27  
(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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Actblue**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 441146

City Somerville	State MA	Zip Code 02144
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12313.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2019

**Transaction ID : INCA980IDTA1239**

Amount of Each Receipt this Period  
 20.00

Memo Item

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	8045.00

**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 18 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. West LA Democratic Club**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 8

City Venice	State CA	Zip Code 90294-0008
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00407007

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10	/	10	/	2019

**Transaction ID : INCA958**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	2500.00

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

Full Name (Last, First, Middle Initial)

**A. Gould & Orellana, LLC.**

Mailing Address 249 E. Ocean Blvd. Ste. 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement PAC Management/Pollitical Reporting Services

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

**001**  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
07 / 01 / 2019

FEC Identification Number  
**C**  
**Transaction ID : EXPB928**  
Amount of Each Disbursement this Period  
125.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement Credit Card Donations Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

**003**  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
07 / 14 / 2019

FEC Identification Number  
**C**  
**Transaction ID : EXPB933**  
Amount of Each Disbursement this Period  
0.79

Memo Item

Full Name (Last, First, Middle Initial)

**C. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement Credit Card Donations Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

**003**  
Category/  
Type

Date of Disbursement  
MM / DD / YYYY  
07 / 28 / 2019

FEC Identification Number  
**C**  
**Transaction ID : EXPB937**  
Amount of Each Disbursement this Period  
0.04

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 125.83  
**TOTAL** This Period (last page this line number only)..... ▶

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

Full Name (Last, First, Middle Initial)

**A. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Donations Processing Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
07 / 31 / 2019

FEC Identification Number  
  
**Transaction ID : EXPB939**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Gould & Orellana, LLC.**

Mailing Address 249 E. Ocean Blvd. Ste. 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement  
PAC Management/Pollitical Reporting Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 01 / 2019

FEC Identification Number  
  
**Transaction ID : EXPB935**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 04 / 2019

FEC Identification Number  
  
**Transaction ID : EXPB946**  
Amount of Each Disbursement this Period

Memo Item

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

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

Full Name (Last, First, Middle Initial)

**A. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
MM / DD / YYYY  
08 / 18 / 2019

FEC Identification Number  
  
**Transaction ID : EXPB948**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
MM / DD / YYYY  
08 / 31 / 2019

FEC Identification Number  
  
**Transaction ID : EXPB951**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Gould & Orellana, LLC.**

Mailing Address 249 E. Ocean Blvd. Ste. 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement  
PAC Management/Pollitical Reporting Services

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
MM / DD / YYYY  
09 / 01 / 2019

FEC Identification Number  
  
**Transaction ID : EXPB949**  
Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text" value="133.70"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

Full Name (Last, First, Middle Initial)

**A. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fee

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
MM / DD / YYYY  
09 / 15 / 2019

FEC Identification Number  
**C**  
**Transaction ID : EXPB954**  
Amount of Each Disbursement this Period  
0.79

Memo Item

Full Name (Last, First, Middle Initial)

**B. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fee

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
MM / DD / YYYY  
09 / 29 / 2019

FEC Identification Number  
**C**  
**Transaction ID : EXPB957**  
Amount of Each Disbursement this Period  
0.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. Gould & Orellana, LLC.**

Mailing Address 249 E. Ocean Blvd. Ste. 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement  
PAC Management/Pollitical Reporting Services

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
MM / DD / YYYY  
10 / 01 / 2019

FEC Identification Number  
**C**  
**Transaction ID : EXPB955**  
Amount of Each Disbursement this Period  
125.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 126.78

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

Full Name (Last, First, Middle Initial)

**A. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fee

003

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB960

Amount of Each Disbursement this Period

[REDACTED] 11.86

Memo Item

Full Name (Last, First, Middle Initial)

**B. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fee

003

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB963

Amount of Each Disbursement this Period

[REDACTED] 0.79

Memo Item

Full Name (Last, First, Middle Initial)

**C. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fee

003

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB966

Amount of Each Disbursement this Period

[REDACTED] 21.73

Memo Item

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

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

[REDACTED] 34.38

[REDACTED]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

**A. Gould & Orellana, LLC.**

Full Name (Last, First, Middle Initial)

Mailing Address 249 E. Ocean Blvd. Ste. 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement PAC Management/Pollitical Reporting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2019

FEC Identification Number: C

Transaction ID : EXPB964

Amount of Each Disbursement this Period: 125.00

Memo Item

**B. Actblue**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2019

FEC Identification Number: C

Transaction ID : EXPB968

Amount of Each Disbursement this Period: 157.55

Memo Item

**C. Actblue**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement Credit Card donations Processing fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 17 / 2019

FEC Identification Number: C

Transaction ID : EXPB972

Amount of Each Disbursement this Period: 173.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 456.29

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



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

**WESTSIDE DEMOCRATIC HQ FEDERAL**

Full Name (Last, First, Middle Initial)

**A. Robin, Cara, , ,**

Mailing Address 6036 W 85th PL

City  
Los Angeles

State  
CA

Zip Code  
90045

Purpose of Disbursement  
Reimbursement for HQ Kick-Off Party

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB969

Amount of Each Disbursement this Period

[REDACTED] 1338.88

Memo Item

Full Name (Last, First, Middle Initial)

**B. Actblue**

Mailing Address P.O. Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

Purpose of Disbursement  
Credit Card donations Processing fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB976

Amount of Each Disbursement this Period

[REDACTED] 71.08

Memo Item

Full Name (Last, First, Middle Initial)

**C. Gould & Orellana, LLC.**

Mailing Address 249 E. Ocean Blvd. Ste. 685

City  
Long Beach

State  
CA

Zip Code  
90802

Purpose of Disbursement  
PAC Management/Political Reporting Services

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB974

Amount of Each Disbursement this Period

[REDACTED] 125.00

Memo Item

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

[REDACTED] 1534.96

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

[REDACTED]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

Full Name (Last, First, Middle Initial)

**A. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card donations Processing fee

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 08 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB979

Amount of Each Disbursement this Period

[REDACTED] 7.72

Memo Item

Full Name (Last, First, Middle Initial)

**B. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card donations Processing fee

001

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB981

Amount of Each Disbursement this Period

[REDACTED] 0.79

Memo Item

Full Name (Last, First, Middle Initial)

**C. Actblue**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB986

Amount of Each Disbursement this Period

[REDACTED] 6.33

Memo Item

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

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

[REDACTED] 14.84

[REDACTED] 2564.63

**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"/> 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)  
**WESTSIDE DEMOCRATIC HQ FEDERAL**

Full Name (Last, First, Middle Initial)

**A. Democratic Alliance for Action of Santa Clarita**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2019

Mailing Address P.O. Box 800222

City Santa Clarita State CA Zip Code 91380

FEC Identification Number

**C** C00407262

Purpose of Disbursement  
Contribution

**011**  
Category/  
Type

**Transaction ID : EXPB929**

Amount of Each Disbursement this Period

40.00

Candidate Name

**Democratic Alliance for Action of Santa Clarita**

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

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

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

40.00

40.00