

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

Leadership, Integrity, Engagement, Unity PAC

ADDRESS (number and street) 16633 Ventura Blvd # 1008

Check if different than previously reported. (ACC) Encino CA 91436

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00589309

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) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on 11 / 08 / 2016 in the State of CA

(d) 30-Day POST-Election Report for the:

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

Election on / / in the State of

5. Covering Period 10 / 01 / 2016 through 10 / 19 / 2016

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 Leiderman, Jane, , ,

Signature of Treasurer Leiderman, Jane, , , [Electronically Filed] Date 10 / 27 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Leadership, Integrity, Engagement, Unity PAC

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="2016"/>	<input type="text" value="15000.00"/>	<input type="text" value="15000.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="21927.06"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="15200.00"/>	<input type="text" value="93900.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="37127.06"/>	<input type="text" value="108900.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5067.16"/>	<input type="text" value="85440.10"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="23459.90"/>	<input type="text" value="23459.90"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="2000.00"/>	

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

Leadership, Integrity, Engagement, Unity PAC

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).....	12000.00	80850.00
(ii) Unitemized	700.00	3050.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12700.00	83900.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	6000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	15200.00	89900.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	4000.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	15200.00	93900.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15200.00	93900.00

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	67.16	63780.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	67.16	63780.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12900.00	55900.00
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	2000.00
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 (Including Non-Federal Donations).....	-7900.00	-36240.00
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)) ..	5067.16	85440.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5067.16	85440.10

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

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)	15200.00	89900.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15200.00	89900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	67.16	63780.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	67.16	63780.10

**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 16
<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)
Leadership, Integrity, Engagement, Unity PAC

A. Higgins, Daniel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1431 21st St

City Manhattan Beach	State CA	Zip Code 90266
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) AICI LLC	Occupation (for Individual) Executive
---	--

Receipt For: 2016
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date **1000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2016

Transaction ID : 11AI-66-I

Amount of Each Receipt this Period

1000.00

 Memo Item

Earmarked through Actblue. Date recieved by conduit in memo record below.

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

Mailing Address 366 Summer St

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For: 2016
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date **26675.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2016

Transaction ID : 11AI-66-I-MEMO

Amount of Each Receipt this Period

1000.00

 Memo Item

Total earmarked through conduit, PAC limits not affected.

C. Smiland, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 E 4Th St # 601

City Los Angeles	State CA	Zip Code 90013
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Inner City Arts	Occupation (for Individual) CEO
--	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date **1000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2016

Transaction ID : 11AI-65

Amount of Each Receipt this Period

1000.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
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: (check only one)	PAGE 7 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Leadership, Integrity, Engagement, Unity PAC

A. Tu, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17600 Newhope St
 City Fountain Valley State CA Zip Code 92708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kingston Technology Occupation (for Individual) President
 Receipt For: 2016
 Primary General
 Other (specify) Calendar Year
 Aggregate Year-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2016
Transaction ID : 11AI-63
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Tu, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17600 Newhope St
 City Fountain Valley State CA Zip Code 92708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Homemaker
 Receipt For: 2016
 Primary General
 Other (specify) Calendar Year
 Aggregate Year-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2016
Transaction ID : 11AI-64
 Amount of Each Receipt this Period
 5000.00
 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

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	12000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 16
(check only one)

<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)
Leadership, Integrity, Engagement, Unity PAC

A. Votevets, Inc
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 10031

City Portland	State OR	Zip Code 97296
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FEC ID number of contributing federal political committee. **C** C00418897

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

Receipt For: 2016
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		01		2016

Transaction ID : 11C-62

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
------	-------	----------

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

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL 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)

Leadership, Integrity, Engagement, Unity PAC

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

Purpose of Disbursement Processing Fee

001

Category/Type

Candidate Name

Actblue

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2016

FEC Identification Number

C C00401224

Transaction ID : 21B-146

Amount of Each Disbursement this Period

7.90

Memo Item

Full Name (Last, First, Middle Initial)

B. Actblue

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

Purpose of Disbursement Processing Fee

001

Category/Type

Candidate Name

Actblue

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2016

FEC Identification Number

C C00401224

Transaction ID : 21B-144

Amount of Each Disbursement this Period

19.76

Memo Item

Full Name (Last, First, Middle Initial)

C. Actblue

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

Purpose of Disbursement Processing Fee

001

Category/Type

Candidate Name

Actblue

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2016

FEC Identification Number

C C00401224

Transaction ID : 21B-145

Amount of Each Disbursement this Period

39.50

Memo Item

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

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

67.16

**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)

Leadership, Integrity, Engagement, Unity PAC

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address 2965 W. Corporate Lakes Blvd.

City
Weston

State
FL

Zip Code
33331

Purpose of Disbursement
Credit Card Payment

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Calendar Year

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 21B-49-W

Amount of Each Disbursement this Period

Memo Item Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

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 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)
Leadership, Integrity, Engagement, Unity PAC

A. Mary Ellen Balchunis for Congress

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 1619

City Havertown State PA Zip Code 19083

Purpose of Disbursement Political Contribution

Candidate Name **Balchunis, Mary Ellen, , ,**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: PA District: 07

Date of Disbursement: 10 / 04 / 2016

FEC Identification Number: **C00560920**
Transaction ID : 23-121
Amount of Each Disbursement this Period: 500.00

Memo Item

B. Sean Barney for Congress

Full Name (Last, First, Middle Initial)
Mailing Address 715 Nottingham Rd.

City Wilmington State DE Zip Code 19805

Purpose of Disbursement Political Contribution

Candidate Name **Barney, Sean, , ,**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: DE District: 01

Date of Disbursement: 10 / 04 / 2016

FEC Identification Number: **C00592857**
Transaction ID : 23-118
Amount of Each Disbursement this Period: 700.00

Memo Item

C. Bryan Caforio for Congress

Full Name (Last, First, Middle Initial)
Mailing Address 24307 Magic Mountain Prkwy, #548

City Valencia State CA Zip Code 91355

Purpose of Disbursement Political Contribution

Candidate Name **Caforio, Bryan, , ,**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: CA District: 25

Date of Disbursement: 10 / 04 / 2016

FEC Identification Number: **C00597724**
Transaction ID : 23-122
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2200.00

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 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)

Leadership, Integrity, Engagement, Unity PAC

Full Name (Last, First, Middle Initial)

A. Hillary Victory Fund

Mailing Address P.O. Box 1367

City
New York

State
NY

Zip Code
10185-1367

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

Clinton, Hillary, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2016			

FEC Identification Number

C C00586537

Transaction ID : 23-117

Amount of Each Disbursement this Period

3700.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Honda for Congress

Mailing Address 123 E. San Carlos St., #531

City
San Jose

State
CA

Zip Code
95112

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

Honda, Mike, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: CA District: 17

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2016			

FEC Identification Number

C C00351379

Transaction ID : 23-120

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Ruben Kihuen for Congress

Mailing Address P.O. Box 458

City
Las Vegas

State
NV

Zip Code
89125

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

Kihuen, Ruben, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NV District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2016			

FEC Identification Number

C C00502773

Transaction ID : 23-78

Amount of Each Disbursement this Period

2000.00

Memo Item

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

6700.00

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 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

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)
Leadership, Integrity, Engagement, Unity PAC

A. Stephanie Murphy for Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 205

M M M	/	D D D	/	Y Y Y Y Y
10		04		2016

City Winter Park State FL Zip Code 32790

FEC Identification Number

Purpose of Disbursement
Political Contribution

C	C00620443
---	-----------

Candidate Name
Murphy, Stephanie, , ,

011
Category/ Type

Transaction ID : 23-116

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: FL District: 07

1000.00

Memo Item

B. Jimmy Panetta for Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 1579

M M M	/	D D D	/	Y Y Y Y Y
10		04		2016

City Carmel Valley State CA Zip Code 93924

FEC Identification Number

Purpose of Disbursement
Political Contribution

C	C00592154
---	-----------

Candidate Name
Panetta, Jimmy, , ,

011
Category/ Type

Transaction ID : 23-119

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CA District: 20

1000.00

Memo Item

C. Rosen for Nevada

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1000 N. Green Valley Pkwy., #440-1

M M M	/	D D D	/	Y Y Y Y Y
10		06		2016

City Henderson State NV Zip Code 89074

FEC Identification Number

Purpose of Disbursement
Political Contribution

C	C00606939
---	-----------

Candidate Name
Rosen, Jacky, , ,

011
Category/ Type

Transaction ID : 23-77

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NV District: 03

2000.00

Memo Item

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

4000.00

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

12900.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership, Integrity, Engagement, Unity PAC

Full Name (Last, First, Middle Initial)

A. American Express - CASH Offset for Federal Contributions Made

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2016

Mailing Address See Line 23

FEC Identification Number

C []

Transaction ID : 29-124

Amount of Each Disbursement this Period

[] -7900.00

Memo Item

City: Weston State: FL Zip Code: 33331

Purpose of Disbursement: Federal contributions made through credit cardSet systmenu to default

012
Category/Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

City: State: Zip Code:

Purpose of Disbursement

[]
Category/Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

City: State: Zip Code:

Purpose of Disbursement

[]
Category/Type

Candidate Name

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

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

[] -7900.00

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

[] -7900.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Leadership, Integrity, Engagement, Unity PAC** Transaction ID : C10-2-LR

LOAN SOURCE Full Name (Last, First, Middle Initial) Ted Lieu for Congress		<input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 16633 Ventura Blvd Ste 1008			
City Encino	State CA	ZIP Code 91436	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 09 / 07 / 2016	MM / DD / YYYY 09 / 07 / 2017	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	2000.00
TOTALS This Period (last page in this line only)	2000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 16
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Leadership, Integrity, Engagement, Unity PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express			Nature of Debt (Purpose): Various credit card purchases. Purpose appears/appeared on Schedule B Credit Card Payee memo records
Mailing Address 2965 W. Corporate Lakes Blvd.			
City Weston	State FL	Zip Code 33331	

Outstanding Balance Beginning This Period 8600.00		Transaction ID : D10-20-W	
Amount Incurred This Period 0.00	Payment This Period 8600.00	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

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