FORM 3X			BURSE			Office	e Use Only
NAME OF COMMITTEE (in f		PE OR PRINT		ample: If typir er the lines.	ng, type	12FE4M5	
Southern Califo	rnian Prog	gressives					
DDRESS (number and		787 Tribute Roa	d, Suite K				
Check if diffe							
than previous reported. (AC		Sacramento				CA 95	815
FEC IDENTIFICA	TION NUME	BER 🔻			S		ZIP CODE
C C00568857			3. IS THIS REPORT		N) <b>OR</b>	× AMENDE (A)	ED
July 15	orts: Report (Q1)	(b) Monthly Report Due On: (c) 12-Day			May 20 (M5) Jun 20 (M6) Jul 20 (M7) ?)	Aug 20 (Ma Sep 20 (Ma Oct 20 (M1 General (12G)	9) Dec 20 (M12 (Non-Election Year Only) 9) Zear Only)
October Quarterly January 3	Report (Q3)		for the:	Convention (	12C)	Special (12S)	in the State of
July 31 M Report (N Year Only	lon-election		Election X	General (300	G)	Runoff (30R)	Special (30S
Terminatio (TER)	on Report		Election on	M M /	04	2004	in the CA
Covering Period	M M 10	/ D D / 16	2014	through	M M 11		2014
certify that I have ex ype or Print Name of		Report and to th	ne best of my kno	wledge and I	oelief it is true	e, correct and com	plete.
						M M /	D D / Y Y Y Y

## 01/31/2015 12 : 56

# SUMMARY PAGE

I	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
W	Vrite or Type Committee Name		
S	Southern Californian Progressives		
R	Report Covering the Period: From:	0 / D D / Y Y Y Y 0 16 2014 To:	11 / D D / Y Y Y Y 11 24 2014
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		0.00
	(b) Cash on Hand at Beginning of Reporting Period	40000.00	
	(c) Total Receipts (from Line 19)	2500.00	42500.00
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	42500.00	42500.00
7.	Total Disbursements (from Line 31)	42136.68	42136.68
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	363.32	363.32
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)	22407.10	

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

	• DET FEC Form 3X (Rev. 06/2004)	AILED SUMMARY PAGE of Receipts	Page 3
10	rite or Type Committee Name		raye <b>3</b>
	Southern Californian Progressives		
_	Southern Californian Progressives		
R	eport Covering the Period: From:	/ D D / Y Y Y Y 16 2014 To:	11 / D D / Y Y Y Y 11 24 2014
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	, 0.00	0.00
	Lines 11(a)(i) and (ii)	7 0.00	0.00
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
	(such as PACs) (d) Total Contributions (add Lines	2500.00	42500.00
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	2500.00	42500.00
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
	(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))►	2500.00	42500.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)►	2500.00	42500.00

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)		Page 4		
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
(c) Total Operating Expenditures	2489.60	2489.60		
(add 21(a)(i), (a)(ii), and (b)) ►	2489.60	2489.60		
Transfers to Affiliated/Other Party Committees	0.00	0.00		
Contributions to Federal Candidates/Committees				
and Other Political Committees	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	39647.08	39647.08		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made Refunds of Contributions To:	0.00	0.00		
(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		
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))►	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	42136.68	42136.68		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	42136.68	42136.68		

L

## **DETAILED SUMMARY PAGE**

of Disbursements

II. Net Contributions/Operating Expenditures					
<ol> <li>Total Contributions (other than loans) (from Line 11(d), page 3)</li> </ol>	2500.00	42500.00			
I. Total Contribution Refunds (from Line 28(d))	0.00	0.00			
. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2500.00	42500.00			
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	2489.60	2489.60			
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00			
. Net Operating Expenditures (subtract Line 37 from Line 36)	2489.60	2489.60			

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

15

'			Detailed Summary Page		11a 13		11b 14	X 11c		12 16	17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma ame and a	ay not be sold or used by any pe ddress of any political committee	erson to se	for the	pur ntrib	pose o	of soliciting	, con	ntribut	ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Southern Californian Progressive										
<b>A</b> .	Mailing Address 1750 New York Avenue, N.W. City Washington FEC ID number of contributing federal political committee. Name of Employer	State DC C COC	Zip Code 20006 0007542			/ sact	07		is Pe	14 eriod 2500.	Y 00
в.	Other (specify)         Full Name (Last, First, Middle Initial)         Mailing Address		2500.00		Date of	_	eceipt	D / Y	Y	Y	Y
	City FEC ID number of contributing federal political committee.										
	Name of Employer	Occupation Aggregate	Year-to-Date ▼				,				
C.	Full Name (Last, First, Middle Initial) Mailing Address City	State	Zip Code		Date of		eceipt	D / Y	Y	Ŷ	Y
	FEC ID number of contributing federal political committee.	Occupation			Amoun	t of	Each	Receipt th	is Pe	eriod	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼								
s	UBTOTAL of Receipts This Page (optional)		▶	-		-	л л			2500.	
ĺΤ	OTAL This Pariod (last page this line number on								2	2500.0	00

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

- 7 -

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S	CHEDULE B (FEC Form 3X)						NUMBE	R:				PAGE	5 7	OF 15	
IT	EMIZED DISBURSEMENTS	BURSEMENTS Use separate schedule(s) for each category of the					y one)								
		Detailed Summary Page			$\vdash$	21b 27	22	a	23 28b	c		1 3c	25 29	26 30b	
	y information copied from such Reports and Stater for commercial purposes, other than using the nar														
$\left  \right $	NAME OF COMMITTEE (In Full)														
	Southern Californian Progressives														
Α.	Full Name (Last, First, Middle Initial) Nossaman, LLP						Date	of E	Disbur	se	ment				
	Mailing Address 777 S. Figueroa Street, 34th Floor						м 1		/ D	18		Y	y y 2014	Y	
		Otata	Zin Onda										2011		
	City Los Angeles	State CA	Zip Code 90017				Tra	nsac	tion l	D	: EXPI	33			
	Purpose of Disbursement Legal Services			C	001		Amount of F			int of Each Disbursement this Period					
	Candidate Name			Cate			Г			ī			44	2.00	
	Office Sought: House Disburser	ment For:		1	ype				7	1		7			
	Senate President	Primary Other (spe	General cify) ▼												
	State: District:		- J/ V												
в.	Full Name (Last, First, Middle Initial) Deane & Company						Date	of D	Disbur	se	ment				
	Dealle & Company						M		/ D			Y	Y Y	Y	
	Mailing Address 1787 Tribute Road, Suite K						1	1	L	0	7	L	2014	_	
	City Sacramento	State CA	Zip Code 95815				Transaction ID : EXPB13								
	Purpose of Disbursement Reporting Services			(	001			Amount of Each Disbursement this Period							
	Candidate Name			Cate	egoi				uo		-			7.60	
	Office Sought: House Disburser	ment For:		Туре					7	1		7			
	Senate President	Primary Other (spe	General												
	State: District:	Other (Spe	city) V												
C.	Full Name (Last, First, Middle Initial)						Date	of E	Disbur	sei	ment				
	Mailing Address						М	М	/ D	Ì	D /	Y	Y Y	Y	
	City	State	Zip Code				_								
	Purpose of Disbursement			_	_										
	Candidate Name			Cate	ego		Amo	unt c	of Eac	h			ent this	Period	
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General cify) ▼						7			7			
_	State: District:														
s	UBTOTAL of Disbursements This Page (optional)					•			-	ļ		,	248	9.60	
_	OTAL This Period (last page this line number only)	)											248	9.60	
1'	The mist chou has page this line number only	,				• 🕨			- 7	1	_	,			

mage# 15950574729					
SCHEDULE D (FEC Form 3X)			(Use se	<sub>parate</sub>	PAGE 8 OF 15
DEBTS AND OBLIGATIONS			schedu	ile(s)	FOR LINE NUMBER:
Excluding Loans			for ea numbere		(check only one) 9 X 10
NAME OF COMMITTEE (In Full)			I	/	
Southern Californian Progressives					
A. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Na	ture of De	ebt (Purpose):
Method Campaign Services			M	ailer - The	e vendor reflected on the previously 24 is a subvendor for this payment
				50 1 0111 2	
Mailing Address 1100 South Flowers Street, #33	00				
City State	Zip Code CA				
Los Angeles	CA	90015			
Outstanding Balance Beginning This Period			Т	ransactio	on ID : PAYD19
0.00					
Amount Incurred This Period	Pay	ment This Period	C	Jutstandin	g Balance at Close of This Period
10383.93			0.00		10383.93
					7 7 7
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor				ebt (Purpose): evendor reflected on the previously
Method Campaign Services					4 is a subvendor for this payment
Mailing Address 1100 South Flowers Street, #33	00				
City State Los Angeles	Zip Code CA	90015			
Outstanding Balance Beginning This Period			I	Transacti	ion ID : PAYD20
				Transacti	
0.00					
Amount Incurred This Period	Payı	ment This Period	C	)utstandin	g Balance at Close of This Period
3461.32			0.00		3461.32
C. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		No	ture of D	abt (Purpaga):
Method Campaign Services			M	lailer - The	ebt (Purpose): e vendor reflected on the previously
			file	ed Form 2	24 is a subvendor for this payment
Mailing Address 1100 South Flowers Street, #33	00				
City	State	Zip Code			
Los Angeles	CA	90015			
Outstanding Balance Beginning This Period			-	Transacti	ion ID : PAYD21
0.00					
Amount Incurred This Period	Pav	ment This Period	C	Dutstandir	g Balance at Close of This Period
3461.31			0.00		3461.31
			0.00		7
1) SUBTOTALS This Period This Page (optional)			······ ►		17306.56
2) TOTALS This Period (last page this line numbe	r only)				
	i oniy)				T         T
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page on	ly)	►		7
4) ADD 2) and 3) and carry forward to appropriate	line of Current	V Page (last the			

mage# 15950574730					
CHEDULE D (FEC Form 3X)				e separate	PAGE 9 OF 15
EBTS AND OBLIGATIONS				nedule(s)	
Excluding Loans		f num			(check only one) 9 X 10
NAME OF COMMITTEE (In Full)					<b>X</b> 10
Southern Californian Progressives					
A. Full Name (Last, First, Middle Initial) of Debte	or or Creditor			Natura of D	ebt (Purpose):
Method Campaign Services				Mailer - The	e vendor reflected on the previously
				filed Form 2	24 is a subvendor for this payment
Mailing Address 1100 South Flowers Street, #33	000				
City State	Zip Code				
Los Angeles	CA	90015			
Outstanding Balance Beginning This Period				Transacti	on ID : PAYD18
0.00					
Amount Incurred This Period	Pay	ment This Period	k	Outstandir	ng Balance at Close of This Period
3018.44			0.00		3018.44
	7		0.00		, , , , , , , , , , , , , , , , , , , ,
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor				ebt (Purpose):
Method Campaign Services				Campaign	Consulting
Mailing Address 1100 South Flowers Street, #33	00				
City State Los Angeles	Zip Code CA	90015			
LOS Aligeles	CA	50015			
Outstanding Delegas Designing This Deviad					
Outstanding Balance Beginning This Period				Transact	ion ID : PAYD33
Outstanding Balance Beginning This Period				Transact	ion ID : PAYD33
	Pay	yment This Perioc	1		ion ID : PAYD33
0.00	Pay	rment This Perioc	0.00		
0.00 Amount Incurred This Period 1538.10	7	rment This Perioc		Outstandir	ng Balance at Close of This Period 1538.10
0.00 Amount Incurred This Period 1538.10 C. Full Name (Last, First, Middle Initial) of Debte	7	yment This Perioc		Outstandir	ng Balance at Close of This Period 1538.10 ebt (Purpose):
0.00 Amount Incurred This Period 1538.10 C. Full Name (Last, First, Middle Initial) of Debte Nossaman, LLP	7	yment This Perioc		Outstandir	ng Balance at Close of This Period 1538.10 ebt (Purpose):
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0.00 Amount Incurred This Period 1538.10 C. Full Name (Last, First, Middle Initial) of Debte Nossaman, LLP Mailing Address 777 S. Figueroa Street, 34th Flo	or or Creditor	/ment This Perioc		Outstandir	ng Balance at Close of This Period 1538.10 ebt (Purpose):
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0.00 Amount Incurred This Period 1538.10 C. Full Name (Last, First, Middle Initial) of Debte Nossaman, LLP Mailing Address 777 S. Figueroa Street, 34th Flo City Los Angeles Outstanding Balance Beginning This Period 0.00	or or Creditor	Zip Code 90017	0.00	Outstandir Nature of D Legal Serv	ng Balance at Close of This Period 1538.10 ebt (Purpose): ices
0.00 Amount Incurred This Period 1538.10 C. Full Name (Last, First, Middle Initial) of Debte Nossaman, LLP Mailing Address 777 S. Figueroa Street, 34th Flo City Los Angeles Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period	or or Creditor	Zip Code	0.00	Outstandir Nature of D Legal Serv	ng Balance at Close of This Period 1538.10 ebt (Purpose): ices ion ID : PAYD17 ng Balance at Close of This Period
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0.00         Amount Incurred This Period         1538.10         C. Full Name (Last, First, Middle Initial) of Debter Nossaman, LLP         Mailing Address       777 S. Figueroa Street, 34th Flor         City         Los Angeles         Outstanding Balance Beginning This Period         0.00         Amount Incurred This Period         544.00	or or Creditor	Zip Code 90017 /ment This Perioc	0.00	Outstandir Nature of D Legal Serv	ng Balance at Close of This Period 1538.10 ebt (Purpose): ices ion ID : PAYD17 ng Balance at Close of This Period 544.00
0.00         Amount Incurred This Period         1538.10         C. Full Name (Last, First, Middle Initial) of Debter Nossaman, LLP         Mailing Address       777 S. Figueroa Street, 34th Flor         City         Los Angeles         Outstanding Balance Beginning This Period         0.00         Amount Incurred This Period         544.00	or or Creditor	Zip Code 90017 /ment This Perioc	0.00	Outstandir Nature of D Legal Serv	ng Balance at Close of This Period 1538.10 ebt (Purpose): ices ion ID : PAYD17 ng Balance at Close of This Period 544.00
0.00         Amount Incurred This Period         1538.10         C. Full Name (Last, First, Middle Initial) of Debter Nossaman, LLP         Mailing Address       777 S. Figueroa Street, 34th Flor         City         Los Angeles         Outstanding Balance Beginning This Period         0.00         Amount Incurred This Period         544.00	or or Creditor	Zip Code 90017	0.00	Outstandir Nature of D Legal Serv	ng Balance at Close of This Period 1538.10 ebt (Purpose): ices ion ID : PAYD17 ng Balance at Close of This Period 544.00
0.00         Amount Incurred This Period         1538.10         C. Full Name (Last, First, Middle Initial) of Debter Nossaman, LLP         Mailing Address         Mailing Address         777 S. Figueroa Street, 34th Flor         City         Los Angeles         Outstanding Balance Beginning This Period         0.00         Amount Incurred This Period         544.00	or or Creditor	Zip Code 90017 /ment This Perioc	0.00	Outstandir Nature of D Legal Serv	ng Balance at Close of This Period 1538.10 ebt (Purpose): ices ion ID : PAYD17 ng Balance at Close of This Period 544.00 5100.54 22407.10

ITEMIZED INDEPENDENT EXPENDIT	URES				PAGE 10 OF 15 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
Southern Californian Progressiv	es			С	C00568857
Check if 24-hour report 48-hour rep	port New rep	port Amends repo	ort filed on	M = M	/ D = D / Y = Y = Y = Y
Full Name of Payee			Dat	e of Publ	lic Distribution/Dissemination
West Coast Public Affairs, Inc.				<sup>M</sup> 10 <sup>M</sup>	/ D D / Y Y Y Y 21 2014
Mailing Address 16060 Ventura Blvd., Suit	e 110		Am	ount	
City	State	Zip Code			13845.25
Encino	CA	91436			D: EDTEALC3 pursement or Obligation
Purpose of Expenditure Mailer		Category/ Type 24E		10 <sup>M</sup>	/ D D / Y Y Y Y 20 / 2014
Name of Federal Candidate		Support	Office Sou	ight:	X House District: 25
Tony Strickland		Oppose	Pres	ident	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		59972.08	Disbursem 2014		Primary X General pecify) ►
Full Name of Payee			Da	te of Pub	lic Distribution/Dissemination
West Coast Public Affairs, Inc.				<sup>M</sup> 10	/ D D / Y Y Y Y 23 2014
Mailing Address 16060 Ventura Blvd., Suit	e 110		Am	iount	
City	State	Zip Code			3461.31
Encino	CA	91436			D: EDTEALC1 pursement or Obligation
Purpose of Expenditure Mailer		Category/ Type 24A		10 <sup>M</sup>	/ D D / Y Y Y Y 20 2014
Name of Federal Candidate		Support	Office Sou	ught:	X House District: 25
Steve Knight		X Oppose	Pres	sident	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		59972.08	Disbursen 2014		Primary X General
(a) SUBTOTAL of Itemized Independent Ex	penditures				17306.56
				-7	
(b) SUBTOTAL of Unitemized Independent	Expenditures		•• ►	-7	
(c) TOTAL Independent Expenditures			•••	7	7
Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorize				
Kim Lutz	[Electron	nically Filed] Date	e 01	/ D 1	2015
Signature					

TEMIZED INDEPENDENT EXPENDITUR	ES				PAGE 11 FOR LINE 2	OF 15 4 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC II		N NUMBER V
Southern Californian Progressives				С	C00568857	
Check if 24-hour report 48-hour report	New r	report Amends rep	ort filed	on	/ D D /	YYYYYY
Full Name of Payee				Date of Publi	ic Distribution/I	Dissemination
West Coast Public Affairs, Inc.				<sup>M</sup> 10	/ 23 /	Y Y Y Y 2014
Mailing Address 16060 Ventura Blvd., Suite 11	0			Amount		
City	State	Zip Code				10383.94
Encino	CA	91436		Transaction II	D: EDTEALC2 ursement or O	
Purpose of Expenditure Mailer		Category/ Type 24E				2014
Name of Federal Candidate		Support	Office	e Sought:	X House I	District: 25
Tony Strickland		Oppose		President	Senate	State: CA
Calendar Year-To-Date Per Election for Office Sought		59972.08	Disbu 2014	ursement For:	Primary	K General
[MEMO ITEM] Mailing Address 1100 South Flowers Street, #3 City	3300 State	Zip Code		10 Amount	27	2014
Los Angeles	CA	90015		Transaction II	D:PDTE6	
Purpose of Expenditure Mailer		Category/ Type 24E				Y Y Y Y 2014
Name of Federal Candidate		Support	Offic	e Sought:	X House	District: 25
Tony Strickland		Oppose		President	Senate	State: CA
Calendar Year-To-Date Per Election for Office Sought		59972.08	Disb 2014		Primary	X General
(a) SUBTOTAL of Itemized Independent Expendent	ditures		►			10383.94
(b) SUBTOTAL of Unitemized Independent Expo	enditures		▶			
(c) TOTAL Independent Expenditures			▶			
Under penalty of perjury I certify that the indep- with, or at the request or suggestion of, any car party committee) any political party committee of	ndidate or authoriz					
Kim Lutz	[Electi	ronically Filed] Date	e 0	1 / D D 1 27	/ 2015	
Signature					-	

EMIZED INDEPENDENT EXPENDITU	RES				PAGE 12 FOR LINE 2	OF 15 24 OF FORM 3X
AME OF COMMITTEE (In Full)				FEC I		ON NUMBER 🔻
Southern Californian Progressive	5			С	C00568857	
heck if24-hour report48-hour repor	rt 🗌 New r	eport Amends rep	ort filed	on	/ D D /	Y . Y . Y . Y
Full Name of Payee				Date of Publ	ic Distribution/	Dissemination
Method Campaign Services [MEMO ITEM]				10 <sup>M</sup>	/ D D / 27	2014
Mailing Address 1100 South Flowers Street,	#3300			Amount		2011
City	State	Zip Code		· · · ·		3461.32
Los Angeles	CA	90015	1	Fransaction I	D : PDTE7	
Purpose of Expenditure Mailer		Category/ Type 24A			bursement or C	
Name of Federal Candidate		Support	Office	Sought:	X House	District: 25
Steve Knight		X Oppose		President	Senate	State: CA
Calendar Year-To-Date Per Election for Office Sought		59972.08	Disbur 2014	rsement For:	Primary	General
Full Name of Payee						/Dissemination
Method Campaign Services				M M	/ D D /	YYYYY
[MEMO ITEM] Mailing Address 1100 South Flowers Street, :	#2200			10	29	2014
	+3300			Amount		
City	State	Zip Code				3461.31
Los Angeles	CA	90015	-	Transaction I Date of Dist	D: PDTE8	Obligation
Purpose of Expenditure Mailer		Category/ Type 24E		10 <sup>M</sup>	/ 29 /	2014
Name of Federal Candidate		Support	Office	Sought:	X House	District: 25
Tony Strickland		Oppose		President	Senate	State: CA
Calendar Year-To-Date Per Election for Office Sought		59972.08	Disbur 2014	rsement For:	Primary	General
(a) SUBTOTAL of Itemized Independent Expe	nditures	,			specify) ▶	0.00
				-7	-7-	
(b) SUBTOTAL of Unitemized Independent Ex	penditures		▶			
(c) TOTAL Independent Expenditures			▶		-7	
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any c party committee) any political party committee	andidate or authoriz					
Kim Lutz	[Electr	conically Filed] Date	01	M / D D	201	
Signature						

remized independent expendit	URES				PAGE 13 OF 15 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V	
Southern Californian Progressive	€S			С	C00568857	
Check if 24-hour report 48-hour report	ort New rep	port Amends repo		M		
Full Name of Payee			Date	of Publ	ic Distribution/Dissemination	
Method Campaign Services [MEMO ITEM]			N	10	/ D D / Y Y Y Y 29 2014	
Mailing Address 1100 South Flowers Street	, #3300		Amou	-		
City	State	Zip Code			3018.44	
Los Angeles	CA	90015	Transaction I		D: PDTE5 bursement or Obligation	
Purpose of Expenditure Mailer		Category/ Type 24A		10 <sup>M</sup>	/ 29 / 2014	
Name of Federal Candidate		Support	Office Sough	it:	K House District: 25	
Steve Knight		X Oppose	Preside	ent [	Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought	· · · · · · · ·	59972.08	Disbursemen 2014		Primary X General pecify) ►	
Full Name of Payee			Date	of Publ	lic Distribution/Dissemination	
Method Campaign Services			h	10 <sup>M</sup>	/ D D / Y Y Y Y 29 2014	
Mailing Address 1100 South Flowers Street	, #3300		Amou	int		
City	State	Zip Code			1280.00	
Los Angeles	CA	90015			D: EDTEALC4 pursement or Obligation	
Purpose of Expenditure Campaign Consulting - This information upda the previously filed Form 24	ates the estimate in	Category/ Type 24A		11	/ D D / Y Y Y Y 10 / 2014	
Name of Federal Candidate		Support	Office Sough	nt:	X House District: 25	
Steve Knight		X Oppose	Presid	ent	Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		59972.08	Disbursemer 2014		Primary X General	
(a) SUBTOTAL of Itemized Independent Exp	enditures				1280.00	
(b) SUBTOTAL of Unitemized Independent E	Expenditures		•	-7		
(c) TOTAL Independent Expenditures			•	-7	· · · · · · · ·	
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized					
Kim Lutz	[Electror	nically Filed] Date	, <sup>M</sup> 01 /	27	/ Y Y Y Y 2015	
Signature						

EMIZED INDEPENDENT EXPENDITURES		PAGE 14 OF 15 FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER V
Southern Californian Progressives		C C00568857
Check if 24-hour report 48-hour report New	report Amends repo	ort filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Method Campaign Services		10 29 2014
Mailing Address 1100 South Flowers Street, #3300		Amount
City State	Zip Code	2720.00
Los Angeles CA	90015	Transaction ID : EDTEALC5 Date of Disbursement or Obligation
Purpose of Expenditure Campaign Consulting - This information updates the estimate in the previously filed Form 24	Category/ Type 24E	$\begin{array}{c c} & & & \\ & & & & \\ & & & \\ & & & & \\ & & & \\ & & & \\ & & & & \\$
Name of Federal Candidate	X Support	Office Sought: X House District: 25
Tony Strickland	Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	59972.08	Disbursement For: 2014 Primary X General Other (specify) ►
Full Name of Payee	,	Date of Public Distribution/Dissemination
Political Data Inc.		M M / D D / Y Y Y
Mailing Address P.O. Box 59570		10292014
12501 Imperial Hwy, Suite 200		Amount
City State	Zip Code	189.15
Norwalk CA	90652	Transaction ID : EDTEALC6 Date of Disbursement or Obligation
Purpose of Expenditure Data - This information updates the estimate in the previously filed Form 24	Category/ Type 24A	11 / D D / Y Y Y Y 2014
Name of Federal Candidate	Support	Office Sought: X House District: 25
Steve Knight	X Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	59972.08	Disbursement For: Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures	<u>, , , , , , , , , , , , , , , , , , , </u>	▶ 0ther (specify) ▶
(b) SUBTOTAL of Uniternized Independent Expenditures		•• •
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expendit with, or at the request or suggestion of, any candidate or author party committee) any political party committee or its agent.		
Kim Lutz [Elec	ctronically Filed] Date	a 01 27 2015
Signature		

ITEMIZED INDEPENDENT EXPENDITORES					PAGE 15 OF 15 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER V
Southern Californian Progressives				С	C00568857
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M	
Full Name of Payee				ate of Publi	c Distribution/Dissemination
Political Data Inc.				<sup>M</sup> 10	/ D D / Y Y Y Y 29 2014
Mailing Address P.O. Box 59570				mount	
12501 Imperial Hwy, Suite 200				anount	
City	State	Zip Code			401.93
Norwalk	CA	90652			D: EDTEALC7 ursement or Obligation
Purpose of Expenditure Data - This information updates the estimate in the p filed Form 24	reviously	Category/ Type 24E		11 <sup>M</sup>	/ D D / Y Y Y Y 07 / 2014
Name of Federal Candidate		X Support	Office S	ought:	K House District: 25
Tony Strickland		Oppose	Pr	esident	Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought	7 7	59972.08	Disburse 2014	ement For:	Primary X General
Full Name of Payee				Date of Publi	ic Distribution/Dissemination
West Coast Public Affairs, Inc.				M M	
Mailing Address				10	29 2014
16060 Ventura Blvd., Suite 110			A	Mount	
City	State	Zip Code	— I		7365.50
Encino	CA	91436		ansaction II Date of Disb	D : PDTE3 ursement or Obligation
Purpose of Expenditure Mailer		Category/ Type 24A		<sup>M</sup> 10	/ <u>29</u> / <u>2014</u>
Name of Federal Candidate		Support	Office S	ouaht:	X House District: 25
Steve Knight		X Oppose		resident	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		59972.08	Disburse 2014	ement For:	Primary X General
	3			Other (s	pecify) ►
(a) SUBTOTAL of Itemized Independent Expenditure	9S		• •		7767.43
(b) SUBTOTAL of Unitemized Independent Expendit	ures		<b>-</b>		
(c) TOTAL Independent Expenditures					
			►		39647.08
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized				
Kim Lutz	[Floctron	ically Filed]	M	/ D D	/ * * * *
Signature	[2.00100	_ Date	e 01	27	2015