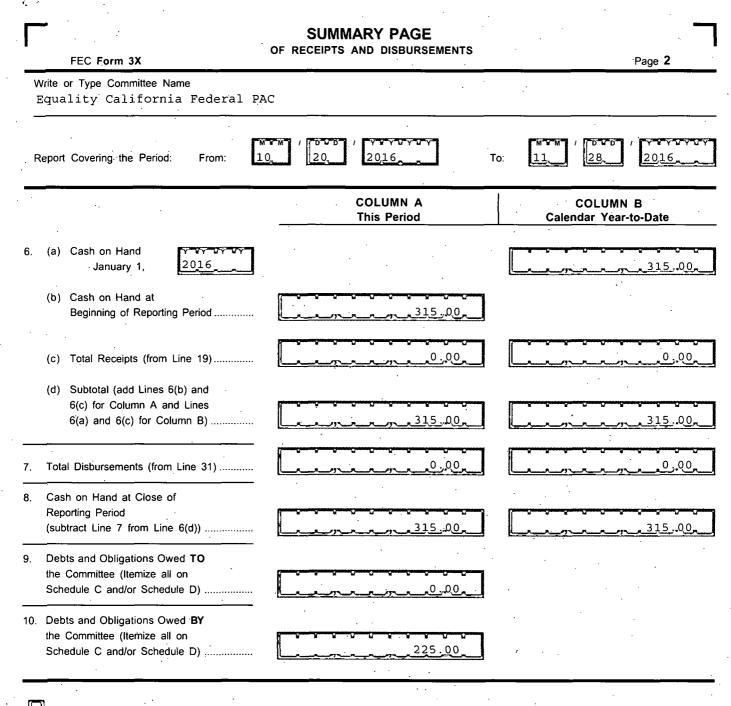
FEC FORM_3X	AND DIS	OF RECEIPT BURSEMENT An Authorized Committ	S	RECEI FEC MAIL 2016 DEC -8	VED CENTER AMII: 48
1. NAME OF COMMITTEE (in fu		Example: If typi over the lines.	ng, type	FE4M5	
	ornia Federal PAC				
	<u>+ + + + + + + + + + + + + + + + + + + </u>	┕╺╘╺╘╺╘	╶┶╌╄╌╄╌╄╌┹╌	┶┥┽┽┶┶┶┥	
ADDRESS (number and	street)	EROA ST., STE. 1110		┶┽┽┵┠┠┽┙	
Check if differ than previous reported. (AC	U UOS ANGELES				_ <u>_</u>
2. FEC IDENTIFICAT			STATE	ZIP C	ODE 🔺
C00493635			NEW (N) OR	AMENDED (A)	
4. TYPE OF REPO (Choose One) (a) Quarterly Rep April 15	Dorts:	Feb 20 (M2) Image: Constraint of the second sec	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10)	Nov 20 (M11) (Nor-Election Dec 20 (M12) (Nor-Election Year Only) Jan 31 (YE)
July 15 Quarterly October	Report (Q3)	for the: DConvention		General (12G)	
July 31 M Report (N Year Onl	Report (YE) /id-Year lon-election (d) 30-Day	474°)G) [F 08] / 2016	Runoff (30R)	Special (30S)
5. Covering Period	10 (20 (2	016 through]
I certify that I have exa	mined this Report and to the			t and complete.	
Type or Print Name of	Treasurer FLORA YIN	, ASSISTANT TREASUR			
Signature of Treasurer	-fly		Date	12 05	2016
NOTE: Submission of fa	alse, erroneous, or insomplete	information may subject the pe	erson signing this Re		
Use Only				FEC FO	RM 3X
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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

www.netfile.com

FE1AN042

FEC Form 3X	DETAILED SUMMARY PAGE of Receipts	Page 3
Write or Type Committee Name	· · · · · · · · · · · · · · · · · · ·	
Equality California Federal	PAC	
Report Covering the Period: From:	10 ^{°°} 20 ^{°°} 2016 ^{°°}	To: 11 / 28 / 2016
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) (ii) Unitemized 		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	• 0.00	
(b) Political Party Committees		0.00
(c) Other Political Committees(such as PACs)(d) Total Contributions (add Lines)	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other	► <u>0.00</u>	0.00
Party Committees		0.00
13. All Loans Received		0.00
 Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.) 	0.00	0.00
(Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal Candidates and Other	·····	<u> </u>
Political Committees 17. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	Т. н. н. н. н. н. н. [*] б. [*] н. Т.	<u> </u>
(from Schedule H3)		0.00
(b) Levin Funds (from Schedule H5)		0.00
(c) Total Transfers (add 18(a) and 18(b))) 0.00	
 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 	• <u>0.00</u>	
0. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	

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FE5AN015

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X

COLUMN A **Total This Period**

COLUMN B Calendar Year-to-Date

Page 4

	II. Disbursements
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share
	(ii) Non-Federal Share
	(b) Other Federal Operating
	Expenditures
	(c) Total Operating Expenditures
	(add 21(a)(i), (a)(ii), and (b)) 🕨
22.	Transfers to Affiliated/Other Party
23.	Committees Contributions to Federal Candidates/Committees and Other Political Committees
24.	Independent Expenditures
25.	(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)
26:	Loan Repayments Made
27. 28.	Loans Made Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees
	(b) Political Party Committees
	(c) Other Political Committees
	(such as PACs)
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))
29 .	Other Disbursements
30 .	Federal Election Activity (2 U.S.C. §431(20))
	(a) Allocated Federal Election Activity

(a)	Allocated Federal Election Activity
	(from Schedule H6)
	(i) Federal Share
	(ii) "Levin" Share

- (b) Federal Election Activity Paid Entirely With Federal Funds
- (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(a)(b))..
- 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 30(c))
- 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) From Line 31)

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FE1AN042

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) COLUMN A III. Net Contributions/Operating Ex-**Total This Period** penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3)

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

(subtract Line 37 from Line 36)▶

Calendar Year-to-Date				
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COLUMN B

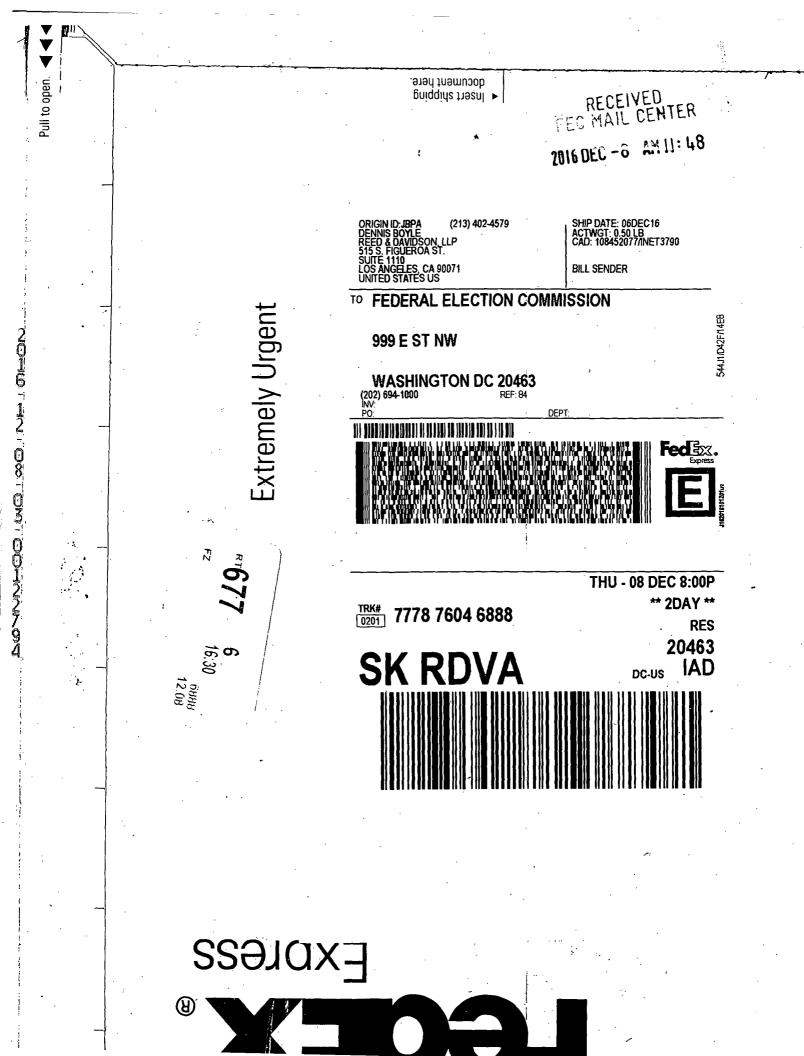
Page 5

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FE6AN026

		i	PAGE 1 OF 1
SCHEDULE D (FEC Form 3X)		separate edule(s)	
DEBTS AND OBLIGATIONS		r each	(check only one)
Excluding Loans	numb	ered line)	X 10
NAME OF COMMITTEE (In Full)		,	
Equality California Federal PAC			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	1	Nature of D	ebt (Purpose):
SED QUAERE, L.P.		Accountin	ng services
			· ·
Mailing Address 760 LAS POSAS RD., B-1			
City State Zip Code			
CAMARILLO , CA 93010 AMOUNT IN DISPUTE			······
Outstanding Balance Beginning This Period			
77.00			
Amount Incurred This Period Payment This Period		Outstandir	ng Balance at Close of This Period
0.00	0.00		77.00
	للسعي	L	<u></u>]
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			ebt (Purpose):
SED QUAERE, L.P.		Accountin	g services
Mailing Address			
760 LAS POSAS RD., B-1			
City State Zip Code			
CAMARILLO , CA 93010 AMOUNT IN DISPUTE Outstanding Balance Beginning This Period	<u>i</u>		
	,		
<u>94.00</u>			
Amount Incurred This Period Payment This Period	·····	Outstandir	ng Balance at Close of This Period
	0.00		94.00
O Full Name (1 and First Middle Initial) of Debter or Ordina		Naturo of D	ebt (Purpose)
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			g services
SED QUAERE, L.P.			
Mailing Address 760 LAS POSAS RD., B-1			
City State Zip Code			
CAMARILLO , CA 93010			·
Outstanding Balance Beginning This Period			
54.00			
Amount Incurred This Period Payment This Period		Outstandir	g Balance at Close of This Period
			
	0.00		<u>, 54.00</u>
	<u> </u>		
1) SUBTOTALS This Period This Page (optional)	F		225.00
	 ••		225.00
2) TOTALS This Period (last page this line number only)			
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	►	L	0.00
			225.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page or	niy) 👘		- <u>1</u>

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Postmark Illegible					
No Postmark					
Overnight Delivery Service (Specify):	Shipping Date				
Received from House Records & Registration Office	Date of Receipt				
Received from Senate Public Records Office	Date of Receipt				
Received from Electronic Filing Office	Date of Receipt				
Date of F	Receipt or Postmarked				
PREPARER (3/2015)	1218116 DATE PREPARED				