

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
Alan Lowenthal For Congress

ADDRESS (number and street) 6380 Wilshire Blvd., #1612  
 Check if different than previously reported. (ACC) Los Angeles CA 90048

2. **FEC IDENTIFICATION NUMBER** C C00498212 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) CA 47

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)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 05 / 15 / 2014 through M M / D D / Y Y Y Y 06 / 30 / 2014

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 Jane Leiderman  
Signature of Treasurer Jane Leiderman *[Electronically Filed]* Date M M / D D / Y Y Y Y 07 / 12 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Alan Lowenthal For Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 15 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	80705.00	641819.03
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	4000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	80705.00	637819.03
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	8254.32	364494.76
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3286.55
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8254.32	361208.21
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>368386.74</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>1465.48</b>	

**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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Alan Lowenthal For Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7655.00	0.00
(ii) Unitemized.....	550.00	0.00
(iii) TOTAL of contributions from individuals ▶	8205.00	269164.44
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	72500.00	372654.59
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	80705.00	641819.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	3286.55
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	3090.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	80705.00	648195.58

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8254.32	364494.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	4000.00
(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 20(a), (b), and (c)).....	0.00	4000.00
21. OTHER DISBURSEMENTS .....	31100.00	98673.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	39354.32	467167.76

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	327011.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	80705.00
25. SUBTOTAL (add Line 23 and Line 24).....	407716.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39354.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	368386.74

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David P. Baker**

Mailing Address 13915 Panay Way

City Marina Del Rey State CA Zip Code 90292

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

Name of Employer David P. Baker Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11AI-5149**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Barona Band of Mission Indians**

Mailing Address 1095 Barona Rd.

City Lakeside State CA Zip Code 92040

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11AI-5155**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Christopher J. Campbell**

Mailing Address 5350 E. Appian Way

City Long Beach State CA Zip Code 90803

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

Name of Employer Christopher J. Campbell Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
345.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : 11AI-5097**

Amount of Each Receipt this Period  
195.00

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

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

1945.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles L. Chang**

Mailing Address 1750 E. Ocean Blvd., #602

City Long Beach State CA Zip Code 90802

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

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : 11AI-5095**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 5617 Sorrento Dr.

City Long Beach State CA Zip Code 90803

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

Name of Employer Fields Law Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 20 / 2014**

**Transaction ID : 11AI-5103**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Gila River Indian Community**

Mailing Address PO Box 2160

City Sacaton State AZ Zip Code 85147

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : 11AI-5120**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Shirley Gottlieb**

Mailing Address 215 Prospect Ave.

City Long Beach State CA Zip Code 90803

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

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : 11AI-5098**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Leonard Matsuk**

Mailing Address 111 W Ocean Blvd

City Long Beach State CA Zip Code 90802

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

Name of Employer Law Offices of Leonard Matsuk Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : 11AI-5157-I**

Amount of Each Receipt this Period  
**250.00**

Earmarked through Matsuk, Leonard Law Offices of. Date received by conduit in memo record below.

**C.** Full Name (Last, First, Middle Initial)  
**Matsuk, Leonard Law Offices of**

Mailing Address 111 W Ocean Blvd

City Long Beach State CA Zip Code 90802

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : 11AI-5157-I-MEMO**

Amount of Each Receipt this Period  
**250.00**

**[MEMO ITEM]**  
 Total earmarked through conduit, PAC limits not affected.

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

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

**350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lester Pincu**

Mailing Address 359 Loma Ave.

City Long Beach State CA Zip Code 90814

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

Name of Employer n/a Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : 11AI-5091**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Karen B Strelitz**

Mailing Address 621 Havana Ave

City Long Beach State CA Zip Code 90814

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

Name of Employer CA Metal Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : 11AI-5092**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Andrea Ware**

Mailing Address 5515 E Sorrento Dr

City Long Beach State CA Zip Code 90803

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

Name of Employer McBrearty and Ware Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : 11AI-5094**

Amount of Each Receipt this Period  
250.00

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

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

1250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>ActBlue</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2014
Mailing Address 14 Arrow St.		<b>Transaction ID : 11AI-5134-P</b>
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	See attribution below.
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 29959.00	

Full Name (Last, First, Middle Initial) <b>Betty Fairbanks</b>		Date of Receipt MM / DD / YYYY 05 / 18 / 2014
Mailing Address 3682 Fenley Dr.		<b>Transaction ID : 11AI-5105-PA</b>
City Los Alamitos	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer n/a	Occupation Retired	<b>[MEMO ITEM]</b> Partnership Attribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>ActBlue</b>		Date of Receipt MM / DD / YYYY 05 / 15 / 2014
Mailing Address 14 Arrow St.		<b>Transaction ID : 11AI-5135-P</b>
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	No partner reaches disclosure threshold.
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 29959.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 01 / 2014
Mailing Address 14 Arrow St.		<b>Transaction ID : 11AI-5155-P</b>
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer	Occupation	No partner reaches disclosure threshold.
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 29959.00	

Full Name (Last, First, Middle Initial) <b>ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 26 / 2014
Mailing Address 14 Arrow St.		<b>Transaction ID : 11AI-5156-P</b>
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1677.00
Name of Employer	Occupation	See attribution below.
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 29959.00	

Full Name (Last, First, Middle Initial) <b>Margo Berdanis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 26 / 2014
Mailing Address 3550 Brayton Ave.		<b>Transaction ID : 11AI-5132-PA</b>
City Long Beach	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer n/a	Occupation Retired	<b>[MEMO ITEM]</b> Partnership Attribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1697.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brett Guge**

Mailing Address 1781 Wilson Ave

City Upland State CA Zip Code 91784

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

Name of Employer California Steel Industries, Inc. Occupation Executive VP Finance & Administration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2014

**Transaction ID : 11AI-5129-PA**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Partnership Attribution

**B.** Full Name (Last, First, Middle Initial)  
**Carolina Mederos**

Mailing Address 2723 O St NW

City Washington State DC Zip Code 20007

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

Name of Employer Patton Boggs LLP Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2014

**Transaction ID : 11AI-5134-PA**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Partnership Attribution

**C.** Full Name (Last, First, Middle Initial)  
**Augustine Vargas**

Mailing Address 1 world Trade Center Ste 800

City Long Beach State CA Zip Code 90831

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

Name of Employer self employed Occupation attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2014

**Transaction ID : 11AI-5133-PA**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
Partnership Attribution

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Patrick Wilson**

Mailing Address 2400 E Pacific Coast Hwy

City State Zip Code  
Wilmington CA 90744

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

Name of Employer Occupation  
Fast Lane Transportation, Inc. Corporate Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 26 / 2014

**Transaction ID : 11AI-5136-PA**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Partnership Attribution

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

Mailing Address 14 Arrow St.

City State Zip Code  
Cambridge MA 02138

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
29959.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 15 / 2014

**Transaction ID : 11AI-5157-P**

Amount of Each Receipt this Period  
25.00

See attribution below.

**C.** Full Name (Last, First, Middle Initial)  
**Ronald Nelson**

Mailing Address 2323 Canehill Ave

City State Zip Code  
Long Beach CA 90815-2259

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

Name of Employer Occupation  
City Of Los Angeles Retired Sr. Mgt Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 15 / 2014

**Transaction ID : 11AI-5137-PA**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Partnership Attribution

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

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

25.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 08 / 2014
Mailing Address 14 Arrow St.		<b>Transaction ID : 11AI-5158-P</b>
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 226.00
Name of Employer	Occupation	No partner reaches disclosure threshold.
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 29959.00	

Full Name (Last, First, Middle Initial) <b>ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2014
Mailing Address 14 Arrow St.		<b>Transaction ID : 11AI-5159-P</b>
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.00
Name of Employer	Occupation	See attribution below.
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 29959.00	

Full Name (Last, First, Middle Initial) <b>Betty Fairbanks</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2014
Mailing Address 3682 Fenley Dr.		<b>Transaction ID : 11AI-5141-PA</b>
City Los Alamitos	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer n/a	Occupation Retired	<b>[MEMO ITEM]</b> Partnership Attribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	341.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 45
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Alan Lowenthal For Congress**

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

Mailing Address 14 Arrow St.

City Cambridge State MA Zip Code 02138

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
29959.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11AI-5165-P**

Amount of Each Receipt this Period  
222.00

See attribution below.

**B.** Full Name (Last, First, Middle Initial)  
**Augustine Vargas**

Mailing Address 1 world Trade Center Ste 800

City Long Beach State CA Zip Code 90831

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

Name of Employer Occupation  
self employed attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11AI-5150-PA**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
Partnership Attribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

222.00

7655.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**A&B Fed PAC**

Mailing Address **PO Box 3440**

City **Honolulu** State **HI** Zip Code **96801**

FEC ID number of contributing federal political committee. **C C00017681**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : 11C-5124**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **500.00**

**B.** Full Name (Last, First, Middle Initial)  
**AES Corporation PAC**

Mailing Address **4300 Wilson Blvd., 11th Floor**

City **Arlington** State **VA** Zip Code **22203**

FEC ID number of contributing federal political committee. **C C00507962**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 23 / 2014**

**Transaction ID : 11C-5080**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AGSH&F Civic Action Committee**

Mailing Address **1333 New Hampshire Ave. NW**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00104901**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : 11C-5121**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1000.00**

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

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

\_\_\_\_\_ **2500.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 45
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AT&T Inc. Federal PAC**

Mailing Address 208 S Akard St, #2701

City State Zip Code  
Dallas TX 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 23 / 2014

**Transaction ID : 11C-5079**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Action Committee for Rural Electrification**

Mailing Address 4301 Wilson Blvd

City State Zip Code  
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00008169

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : 11C-5122**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Air Line Pilots Assoc. Int'l PAC**

Mailing Address 1625 Massachusetts Ave, NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 23 / 2014

**Transaction ID : 11C-5085**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 45
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Academy of Family Physicians PAC-FamMedPAC**

Mailing Address 1133 Connecticut Ave NW # 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00411553**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11C-5075**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**American Crystal Sugar PAC**

Mailing Address 101 North Third Street

City Moorhead State MN Zip Code 56560

FEC ID number of contributing federal political committee. **C C00110338**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11C-5081**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**American Nurses Association PAC**

Mailing Address 8515 Georgia Ave., #400

City Silver Spring State MD Zip Code 20910

FEC ID number of contributing federal political committee. **C C00017525**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : 11C-5073**

Amount of Each Receipt this Period  
1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Psychological Association Practice Organization PAC (APAPO-PAC)**

Mailing Address **PO Box 65353**

City **Washington** State **DC** Zip Code **20035**

FEC ID number of contributing federal political committee. **C C00522094**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 21 / 2014**

**Transaction ID : 11C-5070**

Amount of Each Receipt this Period  
**1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**American Society of Anesthesiologists PAC**

Mailing Address **520 N Northwest Hwy**

City **Park Ridge** State **IL** Zip Code **60068**

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : 11C-5117**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**BNSF RAILPAC**

Mailing Address **PO Box 961039**

City **Fort Worth** State **TX** Zip Code **76161**

FEC ID number of contributing federal political committee. **C C00235739**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 23 / 2014**

**Transaction ID : 11C-5083**

Amount of Each Receipt this Period  
**2000.00**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CULAC the PAC of Credit Union National Association**

Mailing Address 601 Pennsylvania Ave

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : 11C-5126**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Cozen O'Connor PAC**

Mailing Address 1900 Market St., 3rd Fl.

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C C00312777**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11C-5148**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Drive Committee**

Mailing Address 25 Louisiana Ave., NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00032979**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : 11C-5069**

Amount of Each Receipt this Period  
 5000.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edison International PAC**

Mailing Address 2244 Walnut Grove Ave

City State Zip Code  
Rosemead CA 91770

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : 11C-5099**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Edwards Lifesciences PAC**

Mailing Address One Edwards Way

City State Zip Code  
Irvine CA 92614

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11C-5158**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Employees of Northrop Grumman Corporation PAC**

Mailing Address 2960 Fairview Park Dr

City State Zip Code  
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11C-5082**

Amount of Each Receipt this Period  
2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Int'l Organization of Masters Mates & Pilots PAC**

Mailing Address 700 Maritime Blvd., #B

City State Zip Code  
Linthicum MD 21090

FEC ID number of contributing federal political committee. **C** C00073056

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : 11C-5118**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Int'l Union of Painters and Allied Trades, Dist Council 36**

Mailing Address 7234 Parkway Dr

City State Zip Code  
Hanover MD 21076

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : 11C-5107**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**International Longshore & Warehouse Union PAC**

Mailing Address 1188 Franklin St.

City State Zip Code  
San Francisco CA 94109

FEC ID number of contributing federal political committee. **C** C00176214

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2014

**Transaction ID : 11C-5125**

Amount of Each Receipt this Period  
1000.00

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 22 OF 45  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A. Ironworkers Political Action League Multi Candidate Committee (IPAL)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1750 New York Ave., NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C** C00027359  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 12500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : 11C-5146**  
 Amount of Each Receipt this Period  
 5000.00

**B. Jetblue Airways Corporation Crewmember Good Government Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1212 New York Ave NW # 1212  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00484584  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : 11C-5123**  
 Amount of Each Receipt this Period  
 1000.00

**C. League of Conservation Voters Action Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1920 L St., NW, #800  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00252940  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2014  
**Transaction ID : 11C-5101**  
 Amount of Each Receipt this Period  
 1000.00

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. Liuna PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2014	
Mailing Address 905 16th St., NW		<b>Transaction ID : 11C-5068</b>	
City Washington	State DC	Zip Code 20006	
FEC ID number of contributing federal political committee. C C00007922		Amount of Each Receipt this Period 1000.00	
Name of Employer Occupation		Election Cycle-to-Date 5000.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Liuna PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 23 / 2014	
Mailing Address 905 16th St., NW		<b>Transaction ID : 11C-5084</b>	
City Washington	State DC	Zip Code 20006	
FEC ID number of contributing federal political committee. C C00007922		Amount of Each Receipt this Period 1500.00	
Name of Employer Occupation		Election Cycle-to-Date 5000.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Maersk Inc. Good Government Fund</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 02 / 2014	
Mailing Address 1530 Wilson Blvd., #650		<b>Transaction ID : 11C-5115</b>	
City Arlington	State VA	Zip Code 22209	
FEC ID number of contributing federal political committee. C C00217471		Amount of Each Receipt this Period 2000.00	
Name of Employer Occupation		Election Cycle-to-Date 8000.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 8000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A. Marine Fireman's Union Political Action Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 240 2nd St.

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C** C00017244

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11C-5078**

Amount of Each Receipt this Period  
 1000.00

**B. Michigan Sugar Company Growers PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 2600 S Euclid Ave

City Bay City State MI Zip Code 48707

FEC ID number of contributing federal political committee. **C** C00384354

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 11C-5090**

Amount of Each Receipt this Period  
 1500.00

**C. Molina Healthcare, Inc. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 200 Oceangate, #100

City Long Beach State CA Zip Code 90802

FEC ID number of contributing federal political committee. **C** C00430256

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11C-5119**

Amount of Each Receipt this Period  
 1000.00

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

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

3500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A. National Beer Wholesalers Association PAC (NBWA PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 1101 King St. #600

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : 11C-5100**

Amount of Each Receipt this Period  
2500.00

**B. National Fraternal Order of Police PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 309 Massachusetts Ave., NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00382556**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11C-5077**

Amount of Each Receipt this Period  
1000.00

**C. Ocean Champions PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 202 San Jose Ave

City Capitola State CA Zip Code 95010

FEC ID number of contributing federal political committee. **C C00393769**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11C-5147**

Amount of Each Receipt this Period  
500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Political Educational Fund of the BCTD, AFL-CIO**

Mailing Address 815 16th St. NW #600

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00003160

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11C-5074**

Amount of Each Receipt this Period  
 2500.00

Amount of Each Receipt this Period  
 3500.00

**B.** Full Name (Last, First, Middle Initial)  
**Raytheon PAC**

Mailing Address 1100 Wilson Blvd. #1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : 11C-5071**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Raytheon PAC**

Mailing Address 1100 Wilson Blvd. #1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : 11C-5116**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 5000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A. Sempra Energy Employees PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 Ash St  
 City San Diego State CA Zip Code 92101  
 FEC ID number of contributing federal political committee. **C C00008748**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : 11C-5156**  
 Amount of Each Receipt this Period  
 1000.00

**B. Tesoro Corp. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19100 Ridgewood Pkwy  
 City San Antonio State TX Zip Code 78259  
 FEC ID number of contributing federal political committee. **C C00358366**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014  
**Transaction ID : 11C-5111**  
 Amount of Each Receipt this Period  
 1000.00

**C. The NEA Fund for Children & Public Education**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1201 16th St., NW, #420  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C C00003251**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2014  
**Transaction ID : 11C-5072**  
 Amount of Each Receipt this Period  
 2000.00

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UAW V CAP**

Mailing Address 8000 E. Jefferson Ave.

City State Zip Code  
Detroit MI 48214

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : 11C-5089**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 55 Glenlake Pkwy NE

City State Zip Code  
Atlanta GA 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11C-5088**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Union Pacific Corporation Fund for Effective Gov't**

Mailing Address 600 Thirteenth St, NW #340

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : 11C-5102**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 45
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**United For Health, United Health Group**

Mailing Address 9900 Bren Rd E

City Eden Prairie State MN Zip Code 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11C-5087**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**United Steel Workers**

Mailing Address Five Gateway Center

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00003590

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11C-5145**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Wells Fargo & Co. Employees PAC**

Mailing Address Sixth & Marquette

City Minneapolis State MN Zip Code 55479

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : 11C-5086**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

72500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address P.O. Box 537104		Amount of Each Disbursement this Period 341.14 <b>Transaction ID : 17-1604</b>
City Atlanta	State GA	
Zip Code 30353-7104	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 0.99 <b>Transaction ID : 17-1644</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Cr.Card Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. ActBlue</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 1.98 <b>Transaction ID : 17-1645</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Cr.Card Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	344.11
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 0.00
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Merchant Fee	<b>Transaction ID : 17-1632</b>
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 66.26
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Cr.Card Processing Fee	<b>Transaction ID : 17-1633</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 2.43
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Cr.Card Processing Fee	<b>Transaction ID : 17-1646</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	68.69
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : 17-1630</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 0.80 <b>Transaction ID : 17-1631</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Cr.Card Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : 17-1636</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.80
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 9.93 <b>Transaction ID : 17-1637</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Cr.Card Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : 17-1634</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. ActBlue</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 0.99 <b>Transaction ID : 17-1635</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Cr.Card Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9.92
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : 17-1638</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 4.56 <b>Transaction ID : 17-1639</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Cr.Card Processing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. ActBlue</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 0.00 <b>Transaction ID : 17-1640</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Merchant Fee	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4.56
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 8.78
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Cr.Card Processing Fee	<b>Transaction ID : 17-1641</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CA Bank &amp; Trust</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 550 S. Hope St.		Amount of Each Disbursement this Period 236.56
City Los Angeles	State CA	
Zip Code 90071	Purpose of Disbursement Cr.Card Processing Fee	<b>Transaction ID : 17-1650</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CA Bank &amp; Trust</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 550 S. Hope St.		Amount of Each Disbursement this Period 3.60
City Los Angeles	State CA	
Zip Code 90071	Purpose of Disbursement Bank Fee	<b>Transaction ID : 17-1647</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	248.94
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. CA Bank &amp; Trust</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 550 S. Hope St.		Amount of Each Disbursement this Period 114.03
City Los Angeles	State CA	
Zip Code 90071	Purpose of Disbursement Cr.Card Processing Fee	<b>Transaction ID : 17-1648</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CA Bank &amp; Trust</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 550 S. Hope St.		Amount of Each Disbursement this Period 4.64
City Los Angeles	State CA	
Zip Code 90071	Purpose of Disbursement Cr.Card Processing Fee	<b>Transaction ID : 17-1649</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FedEx</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address P.O. Box 7221		Amount of Each Disbursement this Period 89.71
City Pasadena	State CA	
Zip Code 91109-7321	Purpose of Disbursement Shipping	<b>Transaction ID : 17-1611</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	208.38
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. Kieloch Consulting Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2014
Mailing Address 228 2nd St., SE		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : 17-1599</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Management Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Padilla &amp; Associates</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 6380 Wilshire Blvd., #1612		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : 17-1600</b>
City Los Angeles	State CA	
Zip Code 90048	Purpose of Disbursement Accounting Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Statecraft, Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 8618 Nottingham Place		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : 17-1601</b>
City La Jolla	State CA	
Zip Code 92307	Purpose of Disbursement Licensing Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5625.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 45			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. Vien Dong Daily News</b>		Date of Disbursement MM / DD / YYYY 06 / 09 / 2014
Mailing Address 14891 Moran St.		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : 17-1602</b>
City Westminster	State CA	
Zip Code 92683	Purpose of Disbursement Ad	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2014
Mailing Address P.O. Box 301200		Amount of Each Disbursement this Period 130.50 <b>Transaction ID : 17-866-W</b>
City Los Angeles	State CA	
Zip Code 90030-1200	Purpose of Disbursement Credit Card Payment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.

Full Name (Last, First, Middle Initial) <b>c. Bank of America</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address P.O. Box 301200		Amount of Each Disbursement this Period 1081.25 <b>Transaction ID : 17-880-W</b>
City Los Angeles	State CA	
Zip Code 90030-1200	Purpose of Disbursement Credit Card Payment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1561.75
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 45			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. Studebaker Storage</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2014
Mailing Address 698 Studebaker Rd.		Amount of Each Disbursement this Period 130.50
City Long Beach	State CA	
Zip Code 90803	Purpose of Disbursement Storage Rental	<b>Transaction ID : 17-1589-P</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D Bank of America
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Congressional Liquor</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 404 First St., SE		Amount of Each Disbursement this Period 224.75
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Beverages for F/R Event	<b>Transaction ID : 17-1607-P</b>
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D Bank of America
State: District:		

Full Name (Last, First, Middle Initial) <b>c. SQ Eat &amp; Smile Catering</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 2212 Rhode Island Ave., NE		Amount of Each Disbursement this Period 726.00
City Washington	State DC	
Zip Code 20018	Purpose of Disbursement Catering for F/R Event	<b>Transaction ID : 17-1606-P</b>
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D Bank of America
State: District:		

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. Studebaker Storage</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 698 Studebaker Rd.		Amount of Each Disbursement this Period 130.50
City Long Beach	State CA	
Zip Code 90803	Purpose of Disbursement Storage Rental	<b>Transaction ID : 17-1605-P</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D Bank of America
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Studebaker Storage</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 698 Studebaker Rd.		Amount of Each Disbursement this Period 130.50
City Long Beach	State CA	
Zip Code 90803	Purpose of Disbursement Storage Rental	<b>Transaction ID : 17-1623-P</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D Bank of America
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United Airlines</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address P.O. Box 66100		Amount of Each Disbursement this Period 608.00
City Chicago	State IL	
Zip Code 60660	Purpose of Disbursement Airfare-6/16/14-A.Lowenthal-LAX/SMF	<b>Transaction ID : 17-1625-P</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Credit card payee, see Schedule D Bank of America
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	8072.15



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 45	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 430 S. Capitol St., SE		Amount of Each Disbursement this Period 23000.00 <b>Transaction ID : 21-1619</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name <b>Democratic Congressional Campaign Committee</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ron Barber for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 412 First St., S.E., #100		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-1616</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name <b>Ron Barber</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: AZ District: 02		

Full Name (Last, First, Middle Initial) <b>c. Julia Brownley for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address P.O. Box 2018		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-1612</b>
City Thousand Oaks State CA Zip Code 91358	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name <b>Julia Brownley</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: CA District: 26		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	25000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 45	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. Enyart for Congress</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address P.O. Box 636		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-1617</b>
City Annandale	State VA	
Zip Code 22003	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>William L Enyart</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 12	

Full Name (Last, First, Middle Initial) <b>B. Nolan for Congress</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address 6 E Street, S.E.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-1613</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Richard M Nolan</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MN District: 08	

Full Name (Last, First, Middle Initial) <b>c. Schneider for Congress</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address 3701 Porter St., N.W.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-1614</b>
City Washington	State DC	
Zip Code 20016	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Bradley S Schneider</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 10	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 45	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. Carol Shea-Porter for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 27 / 2014</b>
Mailing Address <b>P.O. Box 453</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : 21-1618</b>
City <b>Rochester</b> State <b>NH</b> Zip Code <b>03866</b>	Purpose of Disbursement <b>Political Contribution</b> <b>011</b> Category/Type	
Candidate Name <b>Carol Shea-Porter</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NH</b> District: <b>01</b>		

Full Name (Last, First, Middle Initial) <b>B. Kyrsten Sinema for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 27 / 2014</b>
Mailing Address <b>P.O. Box 25879</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : 21-1615</b>
City <b>Tempe</b> State <b>AZ</b> Zip Code <b>85285</b>	Purpose of Disbursement <b>Political Contribution</b> <b>011</b> Category/Type	
Candidate Name <b>Kyrsten Sinema</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>AZ</b> District: <b>09</b>		

Full Name (Last, First, Middle Initial) <b>C. California Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 09 / 2014</b>
Mailing Address <b>1401 21st St., #200</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : 21-1603</b>
City <b>Sacramento</b> State <b>CA</b> Zip Code <b>95814</b>	Purpose of Disbursement <b>Sponsorship for 6/16/14 Event</b> <b>012</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 45	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Alan Lowenthal For Congress**

Full Name (Last, First, Middle Initial) <b>A. Leadership Long Beach</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2014
Mailing Address 743 Atlantic Ave.		Amount of Each Disbursement this Period \$ 100.00 <b>Transaction ID : 21-1598</b>
City Long Beach	State CA	
Zip Code 90813	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 100.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ 31100.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Alan Lowenthal For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Harman Press</b>	Nature of Debt (Purpose): Postcards, Direct Mail
Mailing Address 6840 Vineland Ave.	
City State Zip Code North Hollywood CA 91605	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : D10-3496-V</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="675.80"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="675.80"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Signal Tribune</b>	Nature of Debt (Purpose): Ad
Mailing Address 939 E. 27th St.	
City State Zip Code Signal Hill CA 90755	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : D10-3075-V</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="275.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="275.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Bank of America</b>	Nature of Debt (Purpose): Various credit card purchases. Purpose appears/appeared on Schedule B Credit Card Payee memo records
Mailing Address P.O. Box 301200	
City State Zip Code Los Angeles CA 90030-1200	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : D10-67-W</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="1726.43"/>	Payment This Period <input style="width:100%;" type="text" value="1211.75"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="514.68"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="1465.48"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text" value="1465.48"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text" value="0.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text" value="1465.48"/>