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### FEC FORM 3X

FE6AN026

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines WEST LOS ANGELES HEALTH PAC - Federal 555 SOUTH FLOWER STREET, SUITE 421 ADDRESS (number and street) Check if different than previously LOS ANGELES CA 90071 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE A CITY A IS THIS NEW **AMENDED** C00198861 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Х Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 0 1 0 1 2008 03 3 1 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. DAVID L. GOULD Type or Print Name of Treasurer Electronically Filed by DAVID L. GOULD 04 15 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name WEST LOS ANGELES HEALTH PAC - Federal <sup>®</sup> D " D 0 1 0 1 2008 0.3 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 10652.00 January 1 (b) Cash on Hand at 10652.00 Begining of Reporting Period ..... 1004.41 1004.41 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 11656.41 11656.41 6(a) and 6(c) for Column B) ..... 5400.00 5400.00 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 6256.41 6256.41 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

WEST LOS ANGELES HEALTH PAC - Federal

Report Covering the Period: From:    M M							
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date					
11. Contributions (other than loans) From:  (a) Individuals/Persons Other							
Than Political Committees  (i) Itemized (use Schedule A)	1000.00	1000.00					
(ii) Unitemized	0.00	0.00					
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1000.00	1000.00					
(b) Political Party Committees	0.00	0.00					
(c) Other Political Committees (such as PACs)	0.00	0.00					
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1000.00	1000.00					
12. Transfers From Affiliated/Other Party Committees	0.00	0.00					
13. All Loans Received	0.00	0.00					
<ul><li>14. Loan Repayments Received</li><li>15. Offsets To Operating Expenditures</li></ul>	0.00	0.00					
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00					
Refunds of Contributions Made     to Federal candidates and Other     Political Committees	0.00	0.00					
17. Other Federal Receipts (Dividends, Interest, etc.)	4.41	4.41					
18. Transfers from Non-Federal and Levin Fund	ds						
(a) Non-Federal Account (from Schedule H3)	0.00	0.00					
(b) Levin Funds (from Schedule H5)	0.00	0.00					
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00					
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1004.41	1004.41					
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1004.41	1004.41					

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party	0.00	0.00
3.	Committees	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	5400.00	5400.00
4.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6	Loan Repayments Made	0.00	0.00
).	Luan repayments made		
	Loans Made Refunds of Contributions To:	0.00	0.00
٠.	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	(b) Political Party Committees (c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds		
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5400.00	5400.00
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		_,,,,,
	from Line 31)	5400.00	5400.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

FE6AN026

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 9 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may not be sold or used by any personing the name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) WEST LOS ANGELES HEALTH	I PAC - Federal	
Full Name (Last, First, Middle Initial)  Marilyn Gilfenbain		Date of Receipt
Mailing Address 425 Martin Ln		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 11ai-113
Beverly HIIIs	CA 90210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer None	Occupation Homemaker	
Receipt For: 2008 Primary General X Other (specify)  Calendar Year	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) The L and J Powell Trust		Date of Receipt
Mailing Address 10375 Wilshire E	Blvd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 11ai-128-P
Los Angeles	CA 90024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Receipt For: 2008	Aggregate Year-to-Date ▼	
Primary General  X Other (specify) ▼ Calendar Year	500.00	See attribution below.
Full Name (Last, First, Middle Initial) Lawrence Powell	I	Date of Receipt
Mailing Address 10375 Wilshire E	Blvd	0 2 0 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 11ai-114-PA
Los Angeles	CA 90024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer None	Occupation Retired	
Receipt For: 2008	Aggregate Year-to-Date ▼	[MEMO ITEM]
Primary General  X Other (specify) ▼ Calendar Year	500.00	Partnership Attribution
SURTOTAL of Receipts This Page (opti	onal)	1000.00
COSTOTAL OF TOCOPES THIS Tage (opti	(i) (ii) (iii) (ii	
TOTAL This Period (last page this line r	number only)	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/9 (check only one)  11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) WEST LOS ANGELES HEALTH PA	C - Federal		
Full Name (Last, First, Middle Initial) California Bank & Trust			Date of Receipt
Mailing Address 550 S Hope St Ste 1	00		01 04 2008
City	State	Zip Code	Transaction ID: 17-129-O
Los Angeles	CA	90071	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		4.41
Name of Employer	Occupation	n	Reversal of Fee
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar year	Aggregate	e Year-to-Date ▼ 4.41	

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SUBTOTAL of Receipts This Page (optional)	•	L					4.41	
TOTAL This Period (last page this line number only)	<u> </u>		_	_		 	4.41	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		PR LINE NUMBER: PAGE 8			AGE 8/	/ 9	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 🔲 2	2 X	23 28b	24 28c	25 29	26
Any Information copied from such Reports and States or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)								
WEST LOS ANGELES HEALTH PAC - F	ederal							
Full Name (Last, First, Middle Initial)  Murtha For Congress Committee			Da	ansaction	sburser	ment	/ * V * V	v
Mailing Address 555 Main St., #220				)3 <sup>M</sup>	1:	3 '	ŽOĎ	8
City Johnstown	State Zip Code PA 15901		Aı	mount of	Each [	Disburse	ement this	
Purpose of Disbursement Political Contribution Candidate Name		011				•	2000.	.00
John P. Murtha	ement For: 2008	Categor Type	y/					
Senate President	Primary General Other (specify) ▼							
State: PA District: 12  Full Name (Last, First, Middle Initial)  A Lot of People for Dave Obey				ansaction				
Mailing Address 525 Washington St PO	Mailing Address 525 Washington St PO Box 1322					0 /	ŹOŎ	8 Y
City Wausau	State Zip Code WI 54402		Aı	mount of	Each [	Disburse	ement this	
Purpose of Disbursement Political Contribution		011					1000.	00
Candidate Name Dave Obey		Categor Type	y/					
9 1	ement For: 2008 Primary General Other (specify)							
Full Name (Last, First, Middle Initial) Lucille Roybal-Allard for Congress			D	ansaction	sburser	ment		
Mailing Address PO Box 582				) 2 <sup>M</sup>	0	4 '	ŽOĎ	8
City Kensington	State Zip Code MD 20895		Aı	mount of	Each [	Disburse	ement this	
Purpose of Disbursement Political Contribution Candidate Name		011					1200.	UU
Lucille Roybal-Allard	oment Ferr	Categor Type	y/					
• -	ement For: 2008 Primary General Other (specify)							
SUBTOTAL of Disbursements This Page (optional)			<b>•</b> [		•		4200.	00
TOTAL This Period (last page this line number only			• [			-		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page  FOR LINE (check only 21b 27)	NUMBER: PAGE 9/9 y one)  22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) WEST LOS ANGELES HEALTH PAC - Fed	ents may not be sold or used by any person f and address of any political committee to so	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Lucille Roybal-Allard for Congress  Mailing Address PO Box 582		Transaction ID: 23-62 Date of Disbursement  O 2 D Y Y Y O Y 8
	State Zip Code MD 20895  011 Category/ Type	Amount of Each Disbursement this Period 1200.00
X	ment For: 2008 Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	•	1200.00
TOTAL This Period (last page this line number only)	<b>—</b>	5400.00