



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Herbalife International Inc. PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="81484.10"/>	<input type="text" value="81484.10"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="100661.66"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5347.70"/>	<input type="text" value="59684.68"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="106009.36"/>	<input type="text" value="141168.78"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4067.13"/>	<input type="text" value="39226.55"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="101942.23"/>	<input type="text" value="101942.23"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Herbalife International Inc. PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5323.86	53897.64
(ii) Unitemized .....	23.84	5787.04
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5347.70	59684.68
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5347.70	59684.68
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5347.70	59684.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5347.70	59684.68

**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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	567.13	6626.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	567.13	6626.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	32600.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4067.13	39226.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4067.13	39226.55

**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) .....	5347.70	59684.68
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5347.70	59684.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	567.13	6626.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	567.13	6626.55

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

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

FOR LINE NUMBER: PAGE 6 OF 31  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

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

Mailing Address 3634 May St

City State Zip Code  
 Los Angeles CA 90066-3606

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

Name of Employer Occupation  
 Herbalife International Sr. Director of DTS

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 410.54

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2015

**Transaction ID : VR0NDEGFBP7**

Amount of Each Receipt this Period  
 31.58

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

Mailing Address 3634 May St

City State Zip Code  
 Los Angeles CA 90066-3606

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

Name of Employer Occupation  
 Herbalife International Sr. Director of DTS

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 442.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2015

**Transaction ID : VR0NDEGFCH9**

Amount of Each Receipt this Period  
 31.58

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

Mailing Address 1550 Greenfield Ave

City State Zip Code  
 Los Angeles CA 90025-3468

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

Name of Employer Occupation  
 Herbalife International Sr. Creative Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 714.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2015

**Transaction ID : VR0NDEGB965**

Amount of Each Receipt this Period  
 47.62

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.78

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. Hal Apple**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1550 Greenfield Ave  
 City Los Angeles State CA Zip Code 90025-3468  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation Sr. Creative Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 761.92

Date of Receipt  
 10 / 23 / 2015  
**Transaction ID : VR0NDEGB9D0**  
 Amount of Each Receipt this Period  
 47.62

**B. James A Barton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 835 Hopkins Way  
 City Redondo Beach State CA Zip Code 90277-2020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation VP Global Strategies  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 776.49

Date of Receipt  
 10 / 09 / 2015  
**Transaction ID : VR0NDEGFBX3**  
 Amount of Each Receipt this Period  
 70.59

**C. James A Barton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 835 Hopkins Way  
 City Redondo Beach State CA Zip Code 90277-2020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation VP Global Strategies  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 847.08

Date of Receipt  
 10 / 23 / 2015  
**Transaction ID : VR0NDEGFCM2**  
 Amount of Each Receipt this Period  
 70.59

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	188.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

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

Mailing Address 3485 Fela Ave

City Long Beach State CA Zip Code 90808-3210

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

Name of Employer Herbalife International Occupation Director, Global Security

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **428.70**

Date of Receipt **10 / 09 / 2015**

**Transaction ID : VR0NDEGFC14**

Amount of Each Receipt this Period **28.58**

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

Mailing Address 3485 Fela Ave

City Long Beach State CA Zip Code 90808-3210

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

Name of Employer Herbalife International Occupation Director, Global Security

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **457.28**

Date of Receipt **10 / 23 / 2015**

**Transaction ID : VR0NDEGFC10**

Amount of Each Receipt this Period **28.58**

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

Mailing Address 724 N West Knoll Dr

City West Hollywood State CA Zip Code 90069-5230

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

Name of Employer Herbalife International Occupation Director, Office of the CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **428.70**

Date of Receipt **10 / 09 / 2015**

**Transaction ID : VR0NDEGFCC9**

Amount of Each Receipt this Period **28.58**

**SUBTOTAL** of Receipts This Page (optional)..... **85.74**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. William J Calder**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 724 N West Knoll Dr  
 City West Hollywood State CA Zip Code 90069-5230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation Director, Office of the CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 457.28

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2015  
**Transaction ID : VR0NDEGFCN0**  
 Amount of Each Receipt this Period  
 28.58

**B. Kuei-Tu Chang**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 931 Viewridge Dr  
 City San Mateo State CA Zip Code 94403-4056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation Research  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 857.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2015  
**Transaction ID : VR0NDEGFC46**  
 Amount of Each Receipt this Period  
 57.15

**C. Kuei-Tu Chang**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 931 Viewridge Dr  
 City San Mateo State CA Zip Code 94403-4056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation Research  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 914.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2015  
**Transaction ID : VR0NDEGFD49**  
 Amount of Each Receipt this Period  
 57.15

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	142.88
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

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

Mailing Address 17118 Parkvalle Ave

City Cerritos State CA Zip Code 90703-1028

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

Name of Employer Herbalife International Occupation Principal Developer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **218.24**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 09 / 2015**

**Transaction ID : VR0NDEGFBV7**

Amount of Each Receipt this Period  
**13.64**

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

Mailing Address 17118 Parkvalle Ave

City Cerritos State CA Zip Code 90703-1028

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

Name of Employer Herbalife International Occupation Principal Developer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **231.88**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 23 / 2015**

**Transaction ID : VR0NDEGFD57**

Amount of Each Receipt this Period  
**13.64**

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

Mailing Address 15442 Six M Ranch Lane

City Torrance State CA Zip Code 90804

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

Name of Employer Herbalife International Occupation Sr. Director - Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **428.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 09 / 2015**

**Transaction ID : VR0NDEGFBZ8**

Amount of Each Receipt this Period  
**28.58**

**SUBTOTAL** of Receipts This Page (optional)..... ► **55.86**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

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

Mailing Address 15442 Six M Ranch Lane

City Torrance State CA Zip Code 90804

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

Name of Employer Herbalife International Occupation Sr. Director - Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **457.28**

Date of Receipt **10 / 23 / 2015**

**Transaction ID : VR0NDEGFCP8**

Amount of Each Receipt this Period **28.58**

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

Mailing Address 1707 Tredegar Rd

City Kernersville State NC Zip Code 27284-3790

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

Name of Employer Herbalife International Occupation Sr. Director of Manufacturing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.08**

Date of Receipt **10 / 09 / 2015**

**Transaction ID : VR0NDEGFCD7**

Amount of Each Receipt this Period **33.34**

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

Mailing Address 1707 Tredegar Rd

City Kernersville State NC Zip Code 27284-3790

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

Name of Employer Herbalife International Occupation Sr. Director of Manufacturing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **433.42**

Date of Receipt **10 / 23 / 2015**

**Transaction ID : VR0NDEGFCV8**

Amount of Each Receipt this Period **33.34**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>95.26</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. Vasilios H Frankos**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 Via Colusa  
 City Redondo Beach State CA Zip Code 90277-6739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation SVP Global Regulatory Compliance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1333.44

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2015  
**Transaction ID : VR0NDEGFCR4**  
 Amount of Each Receipt this Period  
 111.12

**B. Vasilios H Frankos**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 Via Colusa  
 City Redondo Beach State CA Zip Code 90277-6739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation SVP Global Regulatory Compliance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1444.56

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015  
**Transaction ID : VR0NDEGFD15**  
 Amount of Each Receipt this Period  
 111.12

**C. Richard Goudis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26620 Alsace Dr  
 City Calabasas State CA Zip Code 91302-3806  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Herbalife International Occupation COO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.02

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2015  
**Transaction ID : VR0NDEGFC06**  
 Amount of Each Receipt this Period  
 416.67

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	638.91
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

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

Mailing Address 26620 Alsace Dr

City Calabasas	State CA	Zip Code 91302-3806
-------------------	-------------	------------------------

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

Name of Employer Herbalife International	Occupation COO
---	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2916.69

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

**Transaction ID : VR0NDEGFD31**

Amount of Each Receipt this Period  
416.67

Full Name (Last, First, Middle Initial)  
**B. Lance J. Harding**

Mailing Address 3413 Inglewood Blvd

City Los Angeles	State CA	Zip Code 90066-1915
---------------------	-------------	------------------------

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

Name of Employer Herbalife International	Occupation VP, Quality Assurance
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
857.25

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2015

**Transaction ID : VR0NDEG6WQ9**

Amount of Each Receipt this Period  
57.15

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

Mailing Address 3413 Inglewood Blvd

City Los Angeles	State CA	Zip Code 90066-1915
---------------------	-------------	------------------------

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

Name of Employer Herbalife International	Occupation VP, Quality Assurance
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
914.40

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2015

**Transaction ID : VR0NDEG6WS5**

Amount of Each Receipt this Period  
57.15

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	530.97
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. Scott C. Harris**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1718 Wisteria Dr  
City Brea State CA Zip Code 92821-4340  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Director, R&D Foods  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **410.54**

Date of Receipt **10 / 09 / 2015**  
**Transaction ID : VR0NDEGFC62**  
Amount of Each Receipt this Period **31.58**

**B. Scott C. Harris**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1718 Wisteria Dr  
City Brea State CA Zip Code 92821-4340  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Director, R&D Foods  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **442.12**

Date of Receipt **10 / 23 / 2015**  
**Transaction ID : VR0NDEGFD80**  
Amount of Each Receipt this Period **31.58**

**C. Kan He**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 W 190th St  
City Torrance State CA Zip Code 90502-1001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Director, Natural Product Method Desig  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **428.70**

Date of Receipt **10 / 09 / 2015**  
**Transaction ID : VR0NDEGFC70**  
Amount of Each Receipt this Period **28.58**

**SUBTOTAL** of Receipts This Page (optional)..... **91.74**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. Kan He**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 W 190th St  
City Torrance State CA Zip Code 90502-1001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Director, Natural Product Method Desig  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 457.28

Date of Receipt 10 / 23 / 2015  
**Transaction ID : VR0NDEGFDC2**  
Amount of Each Receipt this Period 28.58

**B. Roxanne Hernandez**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8505 Gulpasa Avenue  
City Playa Del Rey State CA Zip Code 90293  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Director, Founders Circle & Chairmans  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 428.70

Date of Receipt 10 / 09 / 2015  
**Transaction ID : VR0NDEGFDC1**  
Amount of Each Receipt this Period 28.58

**C. Roxanne Hernandez**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8505 Gulpasa Avenue  
City Playa Del Rey State CA Zip Code 90293  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Director, Founders Circle & Chairmans  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 457.28

Date of Receipt 10 / 23 / 2015  
**Transaction ID : VR0NDEGFDA6**  
Amount of Each Receipt this Period 28.58

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 85.74  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. Troy Hicks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2509 Colt Rd  
City Rancho Palos Verdes State CA Zip Code 90275-6577  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation VP, Supply Chain  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **821.08**

Date of Receipt **10 / 09 / 2015**  
**Transaction ID : VR0NDEGFCB1**  
Amount of Each Receipt this Period **63.16**

**B. Troy Hicks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2509 Colt Rd  
City Rancho Palos Verdes State CA Zip Code 90275-6577  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation VP, Supply Chain  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **884.24**

Date of Receipt **10 / 23 / 2015**  
**Transaction ID : VR0NDEGFDB4**  
Amount of Each Receipt this Period **63.16**

**C. Johnny Jeong**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8732 Belmont St  
City Cypress State CA Zip Code 90630-6018  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Global Transportation Planning Mgr  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **214.35**

Date of Receipt **10 / 09 / 2015**  
**Transaction ID : VR0NDEGFC88**  
Amount of Each Receipt this Period **14.29**

**SUBTOTAL** of Receipts This Page (optional)..... **140.61**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Herbalife International Inc. PAC**

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

Mailing Address 8732 Belmont St

City Cypress State CA Zip Code 90630-6018

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

Name of Employer Herbalife International Occupation Global Transportation Planning Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.64**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 23 / 2015**

**Transaction ID : VR0NDEGDF6**

Amount of Each Receipt this Period  
**14.29**

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

Mailing Address 990 W 190th St

City Torrance State CA Zip Code 90502-1014

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

Name of Employer Herbalife International Occupation Director, Transfer Pricing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.54**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 09 / 2015**

**Transaction ID : VR0NDEGFCY1**

Amount of Each Receipt this Period  
**31.58**

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

Mailing Address 990 W 190th St

City Torrance State CA Zip Code 90502-1014

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

Name of Employer Herbalife International Occupation Director, Transfer Pricing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **442.12**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 23 / 2015**

**Transaction ID : VR0NDEGFDG4**

Amount of Each Receipt this Period  
**31.58**

**SUBTOTAL** of Receipts This Page (optional)..... **77.45**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. Michael Kevin Kraus**  
Full Name (Last, First, Middle Initial)

Mailing Address 1636 S Barrington Ave

City Los Angeles State CA Zip Code 90025-4070

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

Name of Employer Herbalife International Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.04

Date of Receipt  
10 / 09 / 2015  
Transaction ID : VR0NDEG5RW3

Amount of Each Receipt this Period  
16.67

**B. Michael Kevin Kraus**  
Full Name (Last, First, Middle Initial)

Mailing Address 1636 S Barrington Ave

City Los Angeles State CA Zip Code 90025-4070

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

Name of Employer Herbalife International Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.71

Date of Receipt  
10 / 23 / 2015  
Transaction ID : VR0NDEG5RX1

Amount of Each Receipt this Period  
16.67

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

Mailing Address 2771 Forrester Dr

City Los Angeles State CA Zip Code 90064-3447

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

Name of Employer Herbalife International Occupation Sr VP, Worldwide Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3571.50

Date of Receipt  
10 / 09 / 2015  
Transaction ID : VR0NDEG8C00

Amount of Each Receipt this Period  
238.10

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 271.44

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

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

Mailing Address 2771 Forrester Dr

City Los Angeles State CA Zip Code 90064-3447

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

Name of Employer Herbalife International Occupation Sr VP, Worldwide Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3809.60**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015

**Transaction ID : VR0NDEG8BZ2**

Amount of Each Receipt this Period  
**238.10**

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

Mailing Address 7206 Avenida Altisima

City Rancho Palos Verdes State CA Zip Code 90275-4454

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

Name of Employer Herbalife International Occupation Sr. VP, Research & Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.04**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2015

**Transaction ID : VR0NDEGFC30**

Amount of Each Receipt this Period  
**166.67**

**c. Pradip Mukerji**  
Full Name (Last, First, Middle Initial)

Mailing Address 7206 Avenida Altisima

City Rancho Palos Verdes State CA Zip Code 90275-4454

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

Name of Employer Herbalife International Occupation Sr. VP, Research & Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2166.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015

**Transaction ID : VR0NDEGFD98**

Amount of Each Receipt this Period  
**166.67**

**SUBTOTAL** of Receipts This Page (optional)..... **571.44**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. Omar Ng**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 W Olympic Blvd  
City Los Angeles State CA Zip Code 90015-1360  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Manager, WWW DPC Training  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **214.35**

Date of Receipt **10 / 09 / 2015**  
**Transaction ID : VR0NDEGFCQ6**  
Amount of Each Receipt this Period **14.29**

**B. Omar Ng**  
Full Name (Last, First, Middle Initial)  
Mailing Address 800 W Olympic Blvd  
City Los Angeles State CA Zip Code 90015-1360  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Manager, WWW DPC Training  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **228.64**

Date of Receipt **10 / 23 / 2015**  
**Transaction ID : VR0NDEGFE26**  
Amount of Each Receipt this Period **14.29**

**C. Brian C Obermiller**  
Full Name (Last, First, Middle Initial)  
Mailing Address 107 S Doheny Dr  
City Los Angeles State CA Zip Code 90048-2934  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Sr. Manager  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **214.35**

Date of Receipt **10 / 09 / 2015**  
**Transaction ID : VR0NDEGFCX3**  
Amount of Each Receipt this Period **14.29**

**SUBTOTAL** of Receipts This Page (optional)..... **42.87**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

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

Mailing Address 107 S Doheny Dr

City Los Angeles State CA Zip Code 90048-2934

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

Name of Employer Herbalife International Occupation Sr. Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.64**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015

**Transaction ID : VR0NDEGFDR7**

Amount of Each Receipt this Period  
**14.29**

**B. Bruce J Peters**  
Full Name (Last, First, Middle Initial)

Mailing Address 9903 Santa Monica Blvd

City Beverly Hills State CA Zip Code 90212-1671

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

Name of Employer Herbalife International Occupation Sr. VP Distributor Analytics

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1857.15**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2015

**Transaction ID : VR0NDEG8BW9**

Amount of Each Receipt this Period  
**123.81**

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

Mailing Address 9903 Santa Monica Blvd

City Beverly Hills State CA Zip Code 90212-1671

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

Name of Employer Herbalife International Occupation Sr. VP Distributor Analytics

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1980.96**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2015

**Transaction ID : VR0NDEG8C75**

Amount of Each Receipt this Period  
**123.81**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **261.91**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

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

Mailing Address 990 W 190th St

City Torrance State CA Zip Code 90502-1014

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

Name of Employer Herbalife International Occupation Executive Vice President, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3571.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 09 / 2015**

**Transaction ID : VR0NDEGB981**

Amount of Each Receipt this Period  
**238.10**

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

Mailing Address 990 W 190th St

City Torrance State CA Zip Code 90502-1014

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

Name of Employer Herbalife International Occupation Executive Vice President, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3809.60**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 23 / 2015**

**Transaction ID : VR0NDEGBAF9**

Amount of Each Receipt this Period  
**238.10**

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

Mailing Address 2204 Vanderbilt Ln

City Redondo Beach State CA Zip Code 90278-3149

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

Name of Employer Herbalife International Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **857.25**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 09 / 2015**

**Transaction ID : VR0NDEGFCW6**

Amount of Each Receipt this Period  
**57.15**

**SUBTOTAL** of Receipts This Page (optional)..... **533.35**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. Joseph W Pittman**  
Full Name (Last, First, Middle Initial)

Mailing Address 2204 Vanderbilt Ln

City Redondo Beach State CA Zip Code 90278-3149

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

Name of Employer Herbalife International Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **914.40**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 23 / 2015**

**Transaction ID : VR0NDEGFDZ2**

Amount of Each Receipt this Period  
**57.15**

**B. Alan A Quan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1766 Windsor Rd

City San Marino State CA Zip Code 91108-2526

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

Name of Employer Herbalife International Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.04**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 09 / 2015**

**Transaction ID : VR0NDEGFCJ7**

Amount of Each Receipt this Period  
**66.67**

**c. Alan A Quan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1766 Windsor Rd

City San Marino State CA Zip Code 91108-2526

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

Name of Employer Herbalife International Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **866.71**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 23 / 2015**

**Transaction ID : VR0NDEGFED3**

Amount of Each Receipt this Period  
**66.67**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>190.49</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. J. Silvia Ramirez**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6400 Crescent Park E  
City Playa Vista State CA Zip Code 90094-2338  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Sr. Dir - Distribution Operations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 857.25

Date of Receipt 10 / 09 / 2015  
**Transaction ID : VR0NDEGFCE5**  
Amount of Each Receipt this Period 57.15

**B. J. Silvia Ramirez**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6400 Crescent Park E  
City Playa Vista State CA Zip Code 90094-2338  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Sr. Dir - Distribution Operations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 914.40

Date of Receipt 10 / 23 / 2015  
**Transaction ID : VR0NDEGF42**  
Amount of Each Receipt this Period 57.15

**C. Gwendolyn Richardson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 14472 Cottage Ln  
City Hawthorne State CA Zip Code 90250-0635  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Herbalife International Occupation Project Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 214.35

Date of Receipt 10 / 09 / 2015  
**Transaction ID : VR0NDEGFD65**  
Amount of Each Receipt this Period 14.29

**SUBTOTAL** of Receipts This Page (optional).....▶ 128.59  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

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

Mailing Address 14472 Cottage Ln

City State Zip Code  
Hawthorne CA 90250-0635

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

Name of Employer Occupation  
Herbalife International Project Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**228.64**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2015**

**Transaction ID : VR0NDEGFDV0**

Amount of Each Receipt this Period  
**14.29**

Full Name (Last, First, Middle Initial)  
**B. Ronald L Riley**

Mailing Address 3146 Julian Ave

City State Zip Code  
Long Beach CA 90808-4435

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

Name of Employer Occupation  
Herbalife International VP, Internal Audit

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**857.25**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 09 / 2015**

**Transaction ID : VR0NDEGFCK4**

Amount of Each Receipt this Period  
**57.15**

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

Mailing Address 3146 Julian Ave

City State Zip Code  
Long Beach CA 90808-4435

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

Name of Employer Occupation  
Herbalife International VP, Internal Audit

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**914.40**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 23 / 2015**

**Transaction ID : VR0NDEGFEG6**

Amount of Each Receipt this Period  
**57.15**

**SUBTOTAL** of Receipts This Page (optional)..... **128.59**

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

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

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

FOR LINE NUMBER: PAGE 26 OF 31  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

Full Name (Last, First, Middle Initial)  
**A. Patti R Sabel**

Mailing Address 522 Hillgreen Dr

City State Zip Code  
Beverly Hills CA 90212-4110

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

Name of Employer Occupation  
Herbalife International VP, Assistant Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**428.70**

Date of Receipt  
10 / 09 / 2015  
**Transaction ID : VR0NDEG6WV1**

Amount of Each Receipt this Period  
**28.58**

Full Name (Last, First, Middle Initial)  
**B. Patti R Sabel**

Mailing Address 522 Hillgreen Dr

City State Zip Code  
Beverly Hills CA 90212-4110

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

Name of Employer Occupation  
Herbalife International VP, Assistant Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**457.28**

Date of Receipt  
10 / 23 / 2015  
**Transaction ID : VR0NDEG6WZ3**

Amount of Each Receipt this Period  
**28.58**

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

Mailing Address 950 W 190th St

City State Zip Code  
Torrance CA 90502-1001

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

Name of Employer Occupation  
Herbalife International Chief Information Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**857.25**

Date of Receipt  
10 / 09 / 2015  
**Transaction ID : VR0NDEGFD07**

Amount of Each Receipt this Period  
**57.15**

**SUBTOTAL** of Receipts This Page (optional)..... ► **114.31**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

**A. Mark J Schissel**  
Full Name (Last, First, Middle Initial)

Mailing Address 950 W 190th St

City Torrance State CA Zip Code 90502-1001

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

Name of Employer Herbalife International Occupation Chief Information Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **914.40**

Date of Receipt **10 / 23 / 2015**

**Transaction ID : VR0NDEGFEA9**

Amount of Each Receipt this Period **57.15**

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

Mailing Address 6117 Scotmist Dr

City Rancho Palos Verdes State CA Zip Code 90275-3350

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

Name of Employer Herbalife International Occupation VP Global Product Science & Safety

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **857.25**

Date of Receipt **10 / 09 / 2015**

**Transaction ID : VR0NDEGFCS2**

Amount of Each Receipt this Period **57.15**

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

Mailing Address 6117 Scotmist Dr

City Rancho Palos Verdes State CA Zip Code 90275-3350

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

Name of Employer Herbalife International Occupation VP Global Product Science & Safety

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **914.40**

Date of Receipt **10 / 23 / 2015**

**Transaction ID : VR0NDEGFERO**

Amount of Each Receipt this Period **57.15**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>171.45</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

Full Name (Last, First, Middle Initial)  
**A. Kenneth J Simon**

Mailing Address 1600 Elm Ave

City State Zip Code  
Manhattan Beach CA 90266-5028

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

Name of Employer Occupation  
Herbalife International SVP, Global Taxation & Treasury

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2142.90

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 09 / 2015

**Transaction ID : VR0NDEGB999**

Amount of Each Receipt this Period  
142.86

Full Name (Last, First, Middle Initial)  
**B. Kenneth J Simon**

Mailing Address 1600 Elm Ave

City State Zip Code  
Manhattan Beach CA 90266-5028

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

Name of Employer Occupation  
Herbalife International SVP, Global Taxation & Treasury

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2285.76

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 23 / 2015

**Transaction ID : VR0NDEGBAG7**

Amount of Each Receipt this Period  
142.86

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

Mailing Address 1521 9th St

City State Zip Code  
Manhattan Beach CA 90266-6126

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

Name of Employer Occupation  
Herbalife International VP, Global Taxation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
821.08

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 09 / 2015

**Transaction ID : VR0NDEGB9B4**

Amount of Each Receipt this Period  
63.16

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 348.88

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

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

Mailing Address 1521 9th St

City State Zip Code  
Manhattan Beach CA 90266-6126

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

Name of Employer Occupation  
Herbalife International VP, Global Taxation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**884.24**

Date of Receipt  
**10 / 23 / 2015**

**Transaction ID : VR0NDEGBAH5**

Amount of Each Receipt this Period  
**63.16**

Full Name (Last, First, Middle Initial)  
**B. Timothy M Waters**

Mailing Address 2400 Harriman Ln

City State Zip Code  
Redondo Beach CA 90278-4428

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

Name of Employer Occupation  
Herbalife International VP, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1642.16**

Date of Receipt  
**10 / 09 / 2015**

**Transaction ID : VR0NDEG62B0**

Amount of Each Receipt this Period  
**126.32**

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

Mailing Address 2400 Harriman Ln

City State Zip Code  
Redondo Beach CA 90278-4428

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

Name of Employer Occupation  
Herbalife International VP, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1768.48**

Date of Receipt  
**10 / 23 / 2015**

**Transaction ID : VR0NDEG62E4**

Amount of Each Receipt this Period  
**126.32**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>315.80</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>5323.86</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

Full Name (Last, First, Middle Initial)

### A. Union Bank of California

Mailing Address 445 S Figueroa St

City Los Angeles State CA Zip Code 90071-1615

Purpose of Disbursement  
Bank Service Charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : VQZP5A2J3R1

Amount of Each Disbursement this Period

567.13
--------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

567.13
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567.13
--------

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Herbalife International Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. TENN POLITICAL ACTION COMMITTEE INC (TENN PAC)**

Mailing Address 228 S Washington St

City Alexandria State VA Zip Code 22314-5408

Purpose of Disbursement  
Political Contribution

Candidate Name  
**TENN POLITICAL ACTION COMMITTEE INC (TENN PAC)**

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 30 / 2015

**Transaction ID : VQZP5A2JEJ7**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Tony Cardenas for Congress**

Mailing Address 249 E Ocean Blvd  
Ste 685

City Long Beach State CA Zip Code 90802-8832

Purpose of Disbursement  
Contribution

Candidate Name  
**Tony Cardenas**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CA District: 29

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2015

**Transaction ID : VQZP5A3X8H5**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

3500.00

3500.00