

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

HERBALIFE INTERNATIONAL INC. POLITICAL ACTION COMMITTEE (AKA HERBALIFE PAC)

ADDRESS (number and street) 1800 CENTURY PARK EAST

Check if different than previously reported. (ACC) CENTURY CITY CA 90067

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00393298

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |   |                                       |  |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5)            | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input checked="" type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7)            | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day Post -Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 05 01 2007 through 05 31 2007

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 Richard Goudis

Signature of Treasurer Electronically Filed by Richard Goudis Date 06 20 2007

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 Use Only							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

HERBALIFE INTERNATIONAL INC. POLITICAL ACTION COMMITTEE (AKA HERBALIFEPAC)

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		50330.28
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	36257.88									
(c) Total Receipts (from Line 19) .....	12219.61	21125.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	48477.49	71455.58								
7. Total Disbursements (from Line 31) .....	500.00	23478.09								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	47977.49	47977.49								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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**

Write or Type Committee Name

HERBALIFE INTERNATIONAL INC. POLITICAL ACTION COMMITTEE (AKA HERBALIFEPAC)

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	11092.22	17478.14
(i) Itemized (use Schedule A) .....	1127.39	3647.16
(ii) Unitemized .....	12219.61	21125.30
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	12219.61	21125.30
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 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)) .....	12219.61	21125.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12219.61	21125.30

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	63.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	63.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	23414.92
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	500.00	23478.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	500.00	23478.09

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	12219.61	21125.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12219.61	21125.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	63.17
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	63.17

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<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	

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. POLITICAL ACTION COMMITTEE (AKA HERBALIFEPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> Stacy Brovitz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 2402 4th Street Unit 8		<b>Transaction ID:</b> SA11A1.6670	
City State Zip Code Santa Monica CA 90405		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Herbalife International SVP Global Operations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Stacy Brovitz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 2402 4th Street Unit 8		<b>Transaction ID:</b> SA11A1.6671	
City State Zip Code Santa Monica CA 90405		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Herbalife International SVP Global Operations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Brett R. Chapman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 5054 Royal Vista Court		<b>Transaction ID:</b> SA11A1.6674	
City State Zip Code Thousand Oaks CA 91362		Amount of Each Receipt this Period 105.26	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Herbalife International General Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.52	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	305.26
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 12
	<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. POLITICAL ACTION COMMITTEE (AKA HERBALIFEPAC)

Full Name (Last, First, Middle Initial) <b>A. Brett R. Chapman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 5054 Royal Vista Court		Transaction ID: SA11A1.6675	
City Thousand Oaks	State CA	Zip Code 91362	Amount of Each Receipt this Period 105.26
FEC ID number of contributing federal political committee. C			
Name of Employer Herbalife International	Occupation General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.78		

Full Name (Last, First, Middle Initial) <b>B. Eliu A. Elisara</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 22110 Mayall Street		Transaction ID: SA11A1.6682	
City Chatsworth	State CA	Zip Code 91311	Amount of Each Receipt this Period 43.48
FEC ID number of contributing federal political committee. C			
Name of Employer Herbalife International	Occupation VP, Global Supply Chain & Strategy Squ		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.36		

Full Name (Last, First, Middle Initial) <b>C. Eliu A. Elisara</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 22110 Mayall Street		Transaction ID: SA11A1.6683	
City Chatsworth	State CA	Zip Code 91311	Amount of Each Receipt this Period 43.48
FEC ID number of contributing federal political committee. C			
Name of Employer Herbalife International	Occupation VP, Global Supply Chain & Strategy Squ		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 347.84		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	192.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 12
	<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. POLITICAL ACTION COMMITTEE (AKA HERBALIFEPAC)

Full Name (Last, First, Middle Initial) <b>A.</b> Richard Goudis		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 6100 DeSoto Avenue 2-236		<b>Transaction ID:</b> SA11A1.6684
City Woodland Hills State CA Zip Code 91367	Amount of Each Receipt this Period 105.26	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Herbalife Occupation CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.52	

Full Name (Last, First, Middle Initial) <b>B.</b> Richard Goudis		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 6100 DeSoto Avenue 2-236		<b>Transaction ID:</b> SA11A1.6685
City Woodland Hills State CA Zip Code 91367	Amount of Each Receipt this Period 105.26	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Herbalife Occupation CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.78	

Full Name (Last, First, Middle Initial) <b>C.</b> Paul R. Greenberg		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 703 North Oakhurst Drive		<b>Transaction ID:</b> SA11A1.6686
City Beverly Hills State CA Zip Code 90210	Amount of Each Receipt this Period 89.24	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Herbalife International Occupation Sr. Council Legal Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.88	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>299.76</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 12
	<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. POLITICAL ACTION COMMITTEE (AKA HERBALIFEPAC)

**A.** Full Name (Last, First, Middle Initial)  
Paul R. Greenberg

Mailing Address 703 North Oakhurst Drive

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Occupation  
Herbalife International Sr. Council Legal Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 485.12

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 18 / 2007

Transaction ID: SA11A1.6687

Amount of Each Receipt this Period  
89.24

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

Mailing Address 2663 16th Avenue

City State Zip Code  
San Francisco CA 94116

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

Name of Employer Occupation  
HerbaLife International VP, Global Corporate Communications

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.36

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 04 / 2007

Transaction ID: SA11A1.6690

Amount of Each Receipt this Period  
43.48

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

Mailing Address 2663 16th Avenue

City State Zip Code  
San Francisco CA 94116

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

Name of Employer Occupation  
HerbaLife International VP, Global Corporate Communications

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 347.84

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 18 / 2007

Transaction ID: SA11A1.6691

Amount of Each Receipt this Period  
43.48

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	176.20
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 12
	<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. POLITICAL ACTION COMMITTEE (AKA HERBALIFEPAC)

Full Name (Last, First, Middle Initial) <b>A. Mari Snyder Johnson</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 24840 Pacific Coast Highway		<b>Transaction ID: SA11A1.6656</b>	
City State Zip Code Malibu CA 90205	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self employed	Occupation Producer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Michael O. Johnson</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 24840 Pacific Coast Highway		<b>Transaction ID: SA11A1.6657</b>	
City State Zip Code Malibu CA 90205	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Herbalife International	Occupation President, CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Kenneth J. Simon</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 3513 Elm Avenue		<b>Transaction ID: SA11A1.6696</b>	
City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 43.48		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Herbalife International	Occupation Vice President - Worldwide Taxation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 357.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10043.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 12
	(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. POLITICAL ACTION COMMITTEE (AKA HERBALIFEPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Kenneth J. Simon		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 3513 Elm Avenue		<b>Transaction ID:</b> SA11A1.6697	
City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 43.48		
FEC ID number of contributing federal political committee. C			
Name of Employer Herbalife International	Occupation Vice President - Worldwide Taxation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.48		

<b>B.</b> Full Name (Last, First, Middle Initial) Timothy M. Waters		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 5443 West 142nd Place		<b>Transaction ID:</b> SA11A1.6705	
City State Zip Code Hollyglen CA 90250	Amount of Each Receipt this Period 31.82		
FEC ID number of contributing federal political committee. C			
Name of Employer Herbalife International	Occupation Sr. Director, Pricing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.74		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.30
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	11092.22

**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)

PAGE 12 / 12

<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. POLITICAL ACTION COMMITTEE (AKA HERBALIFEPAC)

Full Name (Last, First, Middle Initial)

**A.** LUCILLE ROYBAL-ALLARD FOR CONGRESS

Mailing Address P.O. Box 582

City Kensington State MD Zip Code 20895

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: CA District: 34

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.6707

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**500.00**

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

**500.00**