

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

Gloria Negrete McLeod for Congress

ADDRESS (number and street) ▼

5415 Francis Ave.

Check if different than previously reported. (ACC)

Chino

CA

91710

2. **FEC IDENTIFICATION NUMBER** ▼

C C00502534

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

35

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Yolanda Miranda

Signature of Treasurer Yolanda Miranda

[Electronically Filed]

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 Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Gloria Negrete McLeod for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	39025.00	168161.57
(b) Total Contribution Refunds (from Line 20(d))	0.00	120.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	39025.00	168041.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	14634.72	53352.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3766.73
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	14634.72	49585.40
8. Cash on Hand at Close of Reporting Period (from Line 27).....	102205.17	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	6000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Gloria Negrete McLeod for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3500.00	54175.57
(ii) Unitemized.....	25.00	3311.00
(iii) TOTAL of contributions from individuals ▶	3525.00	57486.57
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	35500.00	110675.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	39025.00	168161.57
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	3766.73
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	39025.00	171928.30

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14634.72	53352.13
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	50000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	50000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	120.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	120.00
21. OTHER DISBURSEMENTS	1000.00	6378.54
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	15634.72	109850.67

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	78814.89
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	39025.00
25. SUBTOTAL (add Line 23 and Line 24).....	117839.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15634.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	102205.17

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

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

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **7275.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2013

Transaction ID : INCA1197

Amount of Each Receipt this Period
 2250.00

Conduit

B. Full Name (Last, First, Middle Initial)
Amador Dean Aguillen

Mailing Address PO Box 15506

City Washington State DC Zip Code 20003

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

Name of Employer Occupation
 Ogilvy Government Relations Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : IDTA272

Amount of Each Receipt this Period
 1000.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Cristina Antelo

Mailing Address 2312 First St. NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation
 Podesta Group Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2013

Transaction ID : IDTA274

Amount of Each Receipt this Period
 250.00

[MEMO ITEM]

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 24
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

A. Full Name (Last, First, Middle Initial)
Moses Mercado

Mailing Address 1333-A Constitution Ave NE

City Washington State DC Zip Code 20002

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

Name of Employer Ogilvy Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : IDTA273

Amount of Each Receipt this Period
 1000.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Charles C. (Ching Ch Hsu

Mailing Address 2153 N. 1st Ave

City Upland State CA Zip Code 91784

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

Name of Employer Kaiser Permanente Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : INCA1204

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Soboba Band of Luiseno Indians

Mailing Address P.O. Box 487

City San Jacinto State CA Zip Code 92581

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : INCA1178

Amount of Each Receipt this Period
 1000.00

Permissible Funds

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

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

1250.00

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 24
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

A. Full Name (Last, First, Middle Initial)
American Assoc. for Justice (AAJ PAC)

Mailing Address 777 6th Street, NW Suite 200

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2013

Transaction ID : INCA1200

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
American Federation of State,County & Municipal Employees-AFL-CIO

Mailing Address 1625 L Street N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : INCA1183

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
American Physical Therapy Assoc. Physical Therapy PAC (PT-PAC)

Mailing Address 1111 N. Fairfax Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : INCA1184

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

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

Mailing Address 208 S. Akard Street, Suite 2701

City	State	Zip Code
Dallas	TX	75202

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

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 28 / 2013

Transaction ID : INCA1201

Amount of Each Receipt this Period
 _____ 2000.00

B. Full Name (Last, First, Middle Initial)
Comcast Corporation & NBC Universal PAC

Mailing Address 1701 JFK Blvd.

City	State	Zip Code
Philadelphia	PA	19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 09 / 2013

Transaction ID : INCA1194

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
Committee for Hispanic Causes Building Our Leadership Diversity (CHC Bold PAC)

Mailing Address PO BOX 70980

City	State	Zip Code
Washington	DC	20024

FEC ID number of contributing federal political committee. **C** C00365536

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : INCA1181

Amount of Each Receipt this Period
 _____ 5000.00

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

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

_____ 8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 24
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

A. Full Name (Last, First, Middle Initial)
Corp Insurance Professionals Assoc. PAC

Mailing Address 228 S. Washington St., Suite 115

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00503680

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 19 / 2013

Transaction ID : INCA1179

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CULAC PAC of Credit Union National Assn.

Mailing Address 601 Pennsylvania Ave. NW So.

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
11 / 08 / 2013

Transaction ID : INCA1193

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee of The National Automobile Dealers Assoc.

Mailing Address 8400 Western Dr.

City Mclean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 23 / 2013

Transaction ID : INCA1180

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 24
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

A. Diary Educational PAC (Dairy Farmers of America, Inc. DEPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 10220 N. Ambassador Dr.

City Kansas City State MO Zip Code 64153

FEC ID number of contributing federal political committee. **C C00001388**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2013

Transaction ID : INCA1203

Amount of Each Receipt this Period
 1500.00

B. Edison International PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2244 Walnut Grove Ave.

City Rosemead State CA Zip Code 91770

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2013

Transaction ID : INCA1195

Amount of Each Receipt this Period
 1000.00

C. Herbalife International PAC (HerbaPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 990 W. 190th Street, Suite 650

City Torrance State CA Zip Code 90502-1014

FEC ID number of contributing federal political committee. **C C00393298**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2013

Transaction ID : INCA1189

Amount of Each Receipt this Period
 1000.00

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

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

3500.00

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

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

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

A. Full Name (Last, First, Middle Initial)
International Assoc. of Fire Fighters Interested in Registration and Education PAC

Mailing Address 1750 New York Ave., NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		29		2013

Transaction ID : INCA1202

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Laborers' International Union of North America (LIUNA PAC)

Mailing Address 905 16th Street, NW

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2013

Transaction ID : INCA1196

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Molina Healthcare, Inc., PAC

Mailing Address 200 Oceangate, Suite 100

City Long Beach	State CA	Zip Code 90802
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FEC ID number of contributing federal political committee. **C** C00430256

Name of Employer	Occupation
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		01		2013

Transaction ID : INCA1186

Amount of Each Receipt this Period

500.00

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

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

4000.00

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

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

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

A. Full Name (Last, First, Middle Initial)
OPHTHPAC

Mailing Address 1101 Vermont Ave., N.W. Suite, 700

City Wahington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 08 / 2013

Transaction ID : INCA1199

Amount of Each Receipt this Period
1000.00

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

Mailing Address 100 W. Walnut Street

City Pasadena State CA Zip Code 91124

FEC ID number of contributing federal political committee. **C** C00103549

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 02 / 2013

Transaction ID : INCA1188

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Pepsico, Inc. Concerned Citizens Fund

Mailing Address 700 Anderson Hill Road

City Purchase State NY Zip Code 10577

FEC ID number of contributing federal political committee. **C** C00039321

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 26 / 2013

Transaction ID : INCA1182

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

A. Full Name (Last, First, Middle Initial)
Realtors Political Action Committee

Mailing Address 430 N. Michigan Ave.

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : INCA1192

Amount of Each Receipt this Period
 3000.00

B. Full Name (Last, First, Middle Initial)
Realtors Political Action Committee

Mailing Address 430 N. Michigan Ave.

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2013

Transaction ID : INCA1185

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
The Doctors Company Federal PAC

Mailing Address 185 GreenwoodRd.

City Napa State CA Zip Code 94558

FEC ID number of contributing federal political committee. **C** C00300376

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2013

Transaction ID : INCA1187

Amount of Each Receipt this Period
 1000.00

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

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

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

Mailing Address 8000 East Jefferson Ave.

City State Zip Code
Detroit MI 48214-3963

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2013

Transaction ID : INCA1205

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
UnitedHealth Group Incorporated PAC (United for Health)

Mailing Address 9900 Bren Road East

City State Zip Code
Hopkins MN 55343

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2013

Transaction ID : INCA1190

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Verizon Communications Inc./ Verizon Wireless Good Government Club

Mailing Address 1300 I Street, NW - 4th Floor

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2013

Transaction ID : INCA1191

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

35500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 24			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 88.88
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Processing Fee	Transaction ID : EXPB1198
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 0.99
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Processing service	Transaction ID : EXPB1223
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Blue Utopia		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013
Mailing Address P.O. Box 4486		Amount of Each Disbursement this Period 150.00
City Seattle	State WA	
Zip Code 98194	Purpose of Disbursement Online System	Transaction ID : EXPB1221
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	239.87
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 24	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

Full Name (Last, First, Middle Initial) A. Citi Bank Credit Card		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2013
Mailing Address 399 Park Avenue New York		Amount of Each Disbursement this Period 386.42 Transaction ID : EXPB1216
City New York State NY Zip Code 10001	Purpose of Disbursement Credit card payment Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. Tortilla Coast		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2013
Mailing Address 400 First St SE		Amount of Each Disbursement this Period 320.11 Transaction ID : EDTB119EXPB1216 [MEMO ITEM]
City Washington State DC Zip Code 20003	Purpose of Disbursement 09/19/13 Fundraiser event Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) c. Citi Bank Credit Card		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2013
Mailing Address 399 Park Avenue New York		Amount of Each Disbursement this Period 927.01 Transaction ID : EXPB1212
City New York State NY Zip Code 10001	Purpose of Disbursement Credit card payment Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1313.43
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 24			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

Full Name (Last, First, Middle Initial) A. Bull Feathers		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2013
Mailing Address 410 First St. SE		Amount of Each Disbursement this Period 620.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraiser	
Candidate Name	Category/Type 007	Transaction ID : EDTB117EXPB1212 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2013
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 218.75
City Washington State DC Zip Code 20003	Purpose of Disbursement 10/28/13 Fundraiser event	
Candidate Name	Category/Type 003	Transaction ID : EDTB118EXPB1212 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Citi Bank Credit Card		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 399 Park Avenue New York		Amount of Each Disbursement this Period 1324.59
City New York State NY Zip Code 10001	Purpose of Disbursement Credit card payment	
Candidate Name	Category/Type 001	Transaction ID : EXPB1206
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1324.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 24			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

Full Name (Last, First, Middle Initial) A. CA Democratic Party			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 1401 21st Street, Suite 200			Amount of Each Disbursement this Period 255.00
City Sacramento	State CA	Zip Code 95811	
Purpose of Disbursement Dues		Category/ Type 011	Transaction ID : EDTB114EXPB1206 [MEMO ITEM]
Candidate Name CA Democratic Party			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. The Olive Garden			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 3548 S Jefferson Street			Amount of Each Disbursement this Period 408.57
City Falls Church	State VA	Zip Code 22041	
Purpose of Disbursement 11/16/13 Staff Retreat		Category/ Type 001	Transaction ID : EDTB115EXPB1206 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Tortilla Coast			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address 400 First St SE			Amount of Each Disbursement this Period 490.07
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement 12/02/13 Fundraiser event		Category/ Type 003	Transaction ID : EDTB116EXPB1206 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 24			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

Full Name (Last, First, Middle Initial) A. Netfile		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2013
Mailing Address 2707 Aurora Rd.		Amount of Each Disbursement this Period 1100.00
City Mariposa	State CA	
Zip Code 95338	Purpose of Disbursement Online Reporting	Transaction ID : EXPB1219
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sprint		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2013
Mailing Address P.O.Box 54977		Amount of Each Disbursement this Period 98.64
City Los Angeles	State CA	
Zip Code 90054	Purpose of Disbursement Telephone	Transaction ID : EXPB1220
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sprint		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address P.O.Box 54977		Amount of Each Disbursement this Period 98.67
City Los Angeles	State CA	
Zip Code 90054	Purpose of Disbursement Telephone	Transaction ID : EXPB1213
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1297.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 24	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

Full Name (Last, First, Middle Initial) A. Sprint		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address P.O.Box 54977		Amount of Each Disbursement this Period 98.67
City Los Angeles	State CA	
Zip Code 90054	Purpose of Disbursement Telephone	Transaction ID : EXPB1209
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Amy Strathdee		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address 1229 Morse St, NE		Amount of Each Disbursement this Period 3000.00
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Finance Consultant	Transaction ID : EXPB1214
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Amy Strathdee		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 1229 Morse St, NE		Amount of Each Disbursement this Period 6000.00
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Finance Consulting	Transaction ID : EXPB1208
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9098.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 24	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2013
Mailing Address P.O.Box 920041		Amount of Each Disbursement this Period 100.99 Transaction ID : EXPB1217
City Dallas	State TX	
Zip Code 75392-0041	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address P.O.Box 920041		Amount of Each Disbursement this Period 100.89 Transaction ID : EXPB1211
City Dallas	State TX	
Zip Code 75392-0041	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Verizon		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013
Mailing Address P.O.Box 920041		Amount of Each Disbursement this Period 108.89 Transaction ID : EXPB1207
City Dallas	State TX	
Zip Code 75392-0041	Purpose of Disbursement Telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	310.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 24	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2013
Mailing Address P.O. Box 660108		Amount of Each Disbursement this Period 50.08
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Transaction ID : EXPB1218
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Yolanda Miranda & Associates		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 728 W. Edna Place		Amount of Each Disbursement this Period 1000.00
City Covina	State CA	
Zip Code 91722	Purpose of Disbursement Accounting and reporting Services	Transaction ID : EXPB1177
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	1050.08
TOTAL This Period (last page this line number only).....	14634.72

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 24	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Negrete McLeod for Congress

Full Name (Last, First, Middle Initial) A. Zafar Inam for Chaffey College Governing Board 2013			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2013	
Mailing Address PO Box 3955			Amount of Each Disbursement this Period 1000.00	
City Ontario	State CA	Zip Code 91761	Transaction ID : EXPB1215	
Purpose of Disbursement Contribution		011 Category/ Type		
Candidate Name Zafar Inam		Disbursement For: 2014		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

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

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Gloria Negrete McLeod for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lewis and Company, Inc.

Mailing Address 2149 E. Garvey Ave., N, Ste. A-11

City State Zip Code
 West Covina CA 91791

Nature of Debt (Purpose):
 Printing Consultant

Outstanding Balance Beginning This Period **Transaction ID : PAYD911**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Shallman Communications

Mailing Address 16060 Ventura Blvd., Suite 110

City State Zip Code
 Encino CA 91436

Nature of Debt (Purpose):
 General Consulting

Outstanding Balance Beginning This Period **Transaction ID : PAYD910**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="6000.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="6000.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="6000.00"/>