

# 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

Schiff for Congress

ADDRESS (number and street)

777 S. Figueroa Street, Ste. 4050

Check if different than previously reported. (ACC)

Los Angeles

CA

90017

2. FEC IDENTIFICATION NUMBER ▼

C C00343871

CITY ▲

STATE ▲

ZIP CODE ▲

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

CA

28

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

/

/

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

/

/

in the State of

5. Covering Period

M M / D D / Y Y Y Y

10 / 01 / 2013

through

M M / D D / Y Y Y Y

12 / 31 / 2013

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 Stephen Kaufman

Signature of Treasurer Stephen Kaufman

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 31 / 2014

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

Office Use Only								
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FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Schiff 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))....	154962.86	425240.86
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	154962.86	425240.86
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	99542.18	390189.75
(b) Total Offsets to Operating Expenditures (from Line 14).....	114.29	1214.04
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	99427.89	388975.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2043183.10	
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	

**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

**Schiff 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).....	72801.86	208969.86
(ii) Unitemized.....	5061.00	28721.00
(iii) TOTAL of contributions from individuals ▶	77862.86	237690.86
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	77100.00	187550.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	154962.86	425240.86
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.) .....	114.29	1214.04
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	484.12	2513.49
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	155561.27	428968.39

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	99542.18	390189.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	40209.00	111157.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	139751.18	501346.75

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2027373.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	155561.27
25. SUBTOTAL (add Line 23 and Line 24).....	2182934.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	139751.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2043183.10

**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 105
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

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

Mailing Address 2525 N. Catalina St.

City Los Angeles State CA Zip Code 90027

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

Name of Employer Vanguard Medical Occupation Owner

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 : C6219754**

Amount of Each Receipt this Period  
 750.00

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

Mailing Address 700 Forest Green Dr.

City La Canada Flintridge State CA Zip Code 91011

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

Name of Employer Self-Employed Occupation Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207110**

Amount of Each Receipt this Period  
 600.00

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

Mailing Address 300 West Huntington Dr.

City Arcadia State CA Zip Code 91006

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

Name of Employer Methodist Hospital Occupation Head of Emergency Medicine

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6207231**

Amount of Each Receipt this Period  
 1000.00

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

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

2350.00

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

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

FOR LINE NUMBER: PAGE 6 OF 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ernest P. Algorri**

Mailing Address 25 E. Union St.

City Pasadena State CA Zip Code 91103

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

Name of Employer DeWitt, Algorri & Algorri, LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : C6219373**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1963 Calafia St.

City Glendale State CA Zip Code 91208

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

Name of Employer Amirian Home Corporation Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6213063**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address 1510 Virginia Ave.

City Glendale State CA Zip Code 91202

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

Name of Employer Professional Home Health Care, Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207209**

Amount of Each Receipt this Period  
**300.00**

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

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

**850.00**

**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 105
	<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)  
**Schiff for Congress**

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

Mailing Address 4437 Gainsborough Ave.

City Los Angeles State CA Zip Code 90027

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

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207194**

Amount of Each Receipt this Period  
 600.00

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

Mailing Address 125 E. Glenoaks Blvd., Ste. 101

City Glendale State CA Zip Code 91207

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

Name of Employer Sarmont Podiatry Occupation Physician/Podiatrist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207206**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 328 W. Mountain View Pl.

City Palm Springs State CA Zip Code 92262

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207216**

Amount of Each Receipt this Period  
 2600.00

**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 8 OF 105
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>Maral Ayvazian</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 3824 Skycrest		<b>Transaction ID : C6207117</b>
City Pasadena	State CA	Zip Code 91107
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Sahag A. Baghdassarian</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 222 Monterey Road, Apt. #506		<b>Transaction ID : C6213098</b>
City Glendale	State CA	Zip Code 91206
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Eye Care Medical Center	Occupation Opthamologist	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Nazig Bashkijian</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 105 E. Harvard St.		<b>Transaction ID : C6207118</b>
City Glendale	State CA	Zip Code 91205
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Le Pappillon	Occupation Owner/Jeweler	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 2341 Kinclair Dr.

City Pasadena State CA Zip Code 91107

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207120**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 2054 Erin Wy.

City Glendale State CA Zip Code 91206

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

Name of Employer Boyd Real Estate Holdings Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207127**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 2054 Erin Wy.

City Glendale State CA Zip Code 91206

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

Name of Employer Boyd Real Estate Holdings Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6213066**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

**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 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brad D. Brian**

Mailing Address 1150 S. Arroyo Blvd.

City Pasadena State CA Zip Code 91105

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

Name of Employer Occupation  
Munger, Tolles, & Olson Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C6219721**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Natalie Rose Chadarevian**

Mailing Address 6531 Polo Cir.

City Huntington Beach State CA Zip Code 92648

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6213055**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 500 N. Garfield Ave., Suite 107

City Monterey Park State CA Zip Code 91754

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

Name of Employer Occupation  
Self Employed Physician- Gastroenterology

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6213158**

Amount of Each Receipt this Period  
1600.00

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

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

2900.00

**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 105
	<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)  
**Schiff for Congress**

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

Mailing Address 1668 S Garfield Ave #100

City Alhambra State CA Zip Code 91801

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

Name of Employer Self Employed Occupation Physician-Anesthesiology

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6213155**

Amount of Each Receipt this Period  
 1600.00

**B.** Full Name (Last, First, Middle Initial)  
**John S. Chang**

Mailing Address 911 S. Garfield Ave., #C

City Alhambra State CA Zip Code 91801

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6207232**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 300 E. Providencia Ave., Apt. 109

City Burbank State CA Zip Code 91502-3500

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

Name of Employer Law Offices of Gary K. Daglian Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207202**

Amount of Each Receipt this Period  
 300.00

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

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

3400.00

**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 105
	<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)  
**Schiff for Congress**

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

Mailing Address 3116 Kirkham Dr.

City: Glendale State: CA Zip Code: 91206

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

Name of Employer: American Realty Centre Occupation: Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 11 / 15 / 2013

**Transaction ID : C6207125**

Amount of Each Receipt this Period: 500.00

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

Mailing Address 70 Malcolm Dr.

City: Pasadena State: CA Zip Code: 91105

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

Name of Employer: Aspen Diamond Co. Occupation: Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 15 / 2013

**Transaction ID : C6212540**

Amount of Each Receipt this Period: 300.00

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

Mailing Address 4417 Oakwood Ave.

City: La Canada Flintridge State: CA Zip Code: 91011

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

Name of Employer: Homemaker Occupation: Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 15 / 2013

**Transaction ID : C6213050**

Amount of Each Receipt this Period: 300.00

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

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

1100.00

**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 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel H. Deng**

Mailing Address 2112 Walnut Grove Avenue

City State Zip Code  
Rosemead CA 91770

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6213172**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1930 Erin Wy.

City State Zip Code  
Glendale CA 91206

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

Name of Employer Occupation  
Colisee Design Jewellery Designer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207116**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 321 W. Dryden St., Apt. 3

City State Zip Code  
Glendale CA 91202

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

Name of Employer Occupation  
R H & Company Jewelry Dealer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207197**

Amount of Each Receipt this Period  
300.00

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

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

1300.00

**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 105
	<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)  
**Schiff for Congress**

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

Mailing Address 450 S. San Rafael Ave.

City Pasadena State CA Zip Code 91105

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

Name of Employer English Munger & Rice Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 15 / 2013

**Transaction ID : C6207039**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 450 S. San Rafael Ave.

City Pasadena State CA Zip Code 91105

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

Name of Employer English Munger & Rice Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 15 / 2013

**Transaction ID : C6207040**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 2135 Orlando Rd.

City San Marino State CA Zip Code 91108

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

Name of Employer Integer Law Corp Occupation Attorney

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  
 12 / 15 / 2013

**Transaction ID : C6207046**

Amount of Each Receipt this Period  
1000.00

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

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

6200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 105
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>Neal Fialkow</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 215 N. Marengo Ave. Floor 3		<b>Transaction ID : C6219402</b>
City Pasadena	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Neal J. Fialkow Attorney at Law Inc.	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Julie J. Foong</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 1490 Chelsea Rd.		<b>Transaction ID : C6213147</b>
City San Marino	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Self-Employed	Occupation Consultant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) <b>Shobhana Gandhi</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 1300 N Vermont Ave Ste 307		<b>Transaction ID : C6219396</b>
City Los Angeles	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Physician/Obstetrics & Gynecology	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 5510 McCullough Ave.

City Temple City	State CA	Zip Code 91780
---------------------	-------------	-------------------

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

Name of Employer MG Accounting	Occupation CPA
-----------------------------------	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		15		2013

**Transaction ID : C6207195**

Amount of Each Receipt this Period  
450.00

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

Mailing Address 1030 Camann St.

City Glendale	State CA	Zip Code 91208
------------------	-------------	-------------------

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

Name of Employer Self-Employed	Occupation Real Estate Broker
-----------------------------------	----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		15		2013

**Transaction ID : C6207198**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 1722 Camulos Ave.

City Glendale	State CA	Zip Code 91208
------------------	-------------	-------------------

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

Name of Employer Glendale Unified School District	Occupation School Board Member
--	-----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		15		2013

**Transaction ID : C6207114**

Amount of Each Receipt this Period  
500.00

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

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

1250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 432 Puerto Del Mar

City State Zip Code  
Pacific Palisades CA 90272-4233

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

Name of Employer Occupation  
McDermott Will and Emery Attorney

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  
 12 / 16 / 2013

**Transaction ID : C6203982**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5501 Newcastle Ave., #311

City State Zip Code  
Encino CA 91316

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

Name of Employer Occupation  
Farmers Insurance Communications

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : C6219395**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 10424 Valley Spring Ln.

City State Zip Code  
Toluca Lake CA 91602-2806

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

Name of Employer Occupation  
Gibson Dunn Attorney

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 Y  
 12 / 17 / 2013

**Transaction ID : C6204347**

Amount of Each Receipt this Period  
2000.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 4754 Lasheart Dr.

City State Zip Code  
La Canada Flintridge CA 91011

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

Name of Employer Occupation  
American T's Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 15 / 2013

**Transaction ID : C6207193**

Amount of Each Receipt this Period  
900.00

**B.** Full Name (Last, First, Middle Initial)  
**Bedros Alex Jawharjian**

Mailing Address 4499 Via Marisol, #215

City State Zip Code  
Los Angeles CA 90042

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

Name of Employer Occupation  
Barlow Respiratory Hospital Director of Pharmacy

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  
11 / 15 / 2013

**Transaction ID : C6213095**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 147 Tennessee Ave. NE

City State Zip Code  
Washington DC 20002-6425

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

Name of Employer Occupation  
Kadesh & Associates LLC Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
301.86

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

**Transaction ID : C6204073**

Amount of Each Receipt this Period  
150.00

\* In-Kind: Facility Rental Fees

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 105
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>Mark Kadesh</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 30 / 2013
Mailing Address 147 Tennessee Ave. NE		<b>Transaction ID : C6204074</b>
City Washington	State DC	Zip Code 20002-6425
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 151.86	
Name of Employer Kadesh & Associates LLC	Occupation Consultant	* In-Kind: Food & Beverages
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 301.86	

Full Name (Last, First, Middle Initial) <b>Heros Kajberouni</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2013
Mailing Address 901 Kilmory Ln.		<b>Transaction ID : C6207123</b>
City Glendale	State CA	Zip Code 91207
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer H.E.R.O.S., Inc.	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Karine Kalousdian</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2013
Mailing Address 1626 S Central Ave.		<b>Transaction ID : C6207204</b>
City Glendale	State CA	Zip Code 91204
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer Karavan Studio	Occupation Director	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	951.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ara K. Kanbarian**

Mailing Address 3290 N. Knoll Dr.

City Los Angeles	State CA	Zip Code 90068
---------------------	-------------	-------------------

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

Name of Employer Wells Fargo Home Mortgage	Occupation Sales Manager
---	-----------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6213034**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 1623 Ben Lomond Dr.

City Glendale	State CA	Zip Code 91202
------------------	-------------	-------------------

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

Name of Employer Hichoice Health Care	Occupation Administrator
--	-----------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6213064**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 5440 Arroyo Summit Drive

City La Canada Flintridge	State CA	Zip Code 91011-1807
------------------------------	-------------	------------------------

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

Name of Employer Fairview Center	Occupation Physician
-------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207196**

Amount of Each Receipt this Period  
450.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 1651 Hastings Heights Ln.

City Pasadena State CA Zip Code 91107

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

Name of Employer Palladio Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207141**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 2709 Deep Canyon Dr.

City Beverly Hills State CA Zip Code 90210

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6213179**

Amount of Each Receipt this Period  
 750.00

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

Mailing Address 1044 Trafalger Dr.

City Glendale State CA Zip Code 91207

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

Name of Employer M.K. Designers, Inc. Occupation CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6213180**

Amount of Each Receipt this Period  
 1500.00

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

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

3750.00

**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 22 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 516 Stanford Rd.

City Burbank State CA Zip Code 91504

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

Name of Employer Fore Fathers Financial Inc. Occupation Member

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6213033**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Ani Halabi Khroyan**

Mailing Address 7660 Rocky Mountain View Rd.

City Tujunga State CA Zip Code 91042

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

Name of Employer Self-Employed Occupation Opthamologist/Surgeon

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 : C6219740**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 512 Salem St., Apt. 4

City Glendale State CA Zip Code 91203

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

Name of Employer Konanyan Meat Co./ Artisan Breads Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6213054**

Amount of Each Receipt this Period  
 300.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 1209 Phillips Rd.

City State Zip Code  
Glendale CA 91207

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

Name of Employer Occupation  
Paramount Real Estate Agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 15 / 2013

**Transaction ID : C6207115**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1613 Chelsea Rd., #149

City State Zip Code  
San Marino CA 91108

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

Name of Employer Occupation  
LAMS USA/Koko Fashion Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2013

**Transaction ID : C6207239**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 88 Mercedes Lane

City State Zip Code  
Atherton CA 94027

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

Name of Employer Occupation  
Lauder Partners Venture Capitalist

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  
12 / 09 / 2013

**Transaction ID : C6219377**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Su Kin Lee**

Mailing Address 630 San Marino Ave.

City San Marino State CA Zip Code 91108

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6213151**

Amount of Each Receipt this Period  
1600.00

**B.** Full Name (Last, First, Middle Initial)  
**Su Kin Lee**

Mailing Address 630 San Marino Ave.

City San Marino State CA Zip Code 91108

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6213165**

Amount of Each Receipt this Period  
750.00

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

Mailing Address 8635 W. 3rd St., #485

City Los Angeles State CA Zip Code 90048

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

Name of Employer Self-Employed Occupation Physician

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  
 11 / 15 / 2013

**Transaction ID : C6213176**

Amount of Each Receipt this Period  
250.00

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

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

2600.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 535 N. Brand Blvd., Ste. 270

City: Glendale State: CA Zip Code: 91203

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

Name of Employer: Self-Employed Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 15 / 2013

**Transaction ID : C6213062**

Amount of Each Receipt this Period: 300.00

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

Mailing Address 19235 Northfleet Wy.

City: Tarzana State: CA Zip Code: 91356

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

Name of Employer: Self Employed Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 09 / 2013

**Transaction ID : C6219392**

Amount of Each Receipt this Period: 500.00

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

Mailing Address 815 Saint Katherine Dr.

City: La Canada Flintridge State: CA Zip Code: 91011

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

Name of Employer: Closet Wrld./Amer. Hi-Definition, Inc. Occupation: President and CEO/Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3000.00

Date of Receipt: 11 / 15 / 2013

**Transaction ID : C6207134**

Amount of Each Receipt this Period: 2600.00

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

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

3400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 815 Saint Katherine Dr.

City State Zip Code  
La Canada Flintridge CA 91011

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

Name of Employer Occupation  
Closet Wrld./Amer. Hi-Definition, Inc. President and CEO/Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207136**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 27 Ridgeline Dr.

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Occupation  
Retired Retired

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  
 11 / 15 / 2013

**Transaction ID : C6207138**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 10201 W. Pico Blvd.

City State Zip Code  
Los Angeles CA 90064

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

Name of Employer Occupation  
21st Century Fox Deputy Chief Operating Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : C6219750**

Amount of Each Receipt this Period  
2500.00

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

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

4900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 744 11th St.

City Manhattan Beach State CA Zip Code 90266

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

Name of Employer Self-Employed Occupation Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207129**

Amount of Each Receipt this Period  
 600.00

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

Mailing Address 1681 Royal Blvd.

City Glendale State CA Zip Code 91207

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

Name of Employer Law Office of Avedis Nalbandian Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6213053**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
**Lawrence O'Brien**

Mailing Address 3410 Que St.

City Washington State DC Zip Code 20007

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

Name of Employer O'Brien Calio Occupation Attorney

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 : C6219752**

Amount of Each Receipt this Period  
 500.00

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

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

1400.00

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

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

FOR LINE NUMBER: PAGE 28 OF 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

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

Mailing Address 1628 Glenwood Rd.

City State Zip Code  
Glendale CA 91201

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

Name of Employer Occupation  
Coldwell Banker Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207211**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 1408 Cordova Ave.

City State Zip Code  
Glendale CA 91207

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

Name of Employer Occupation  
Wells Fargo Home Mortgage Mortgage Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207199**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 1631 Opechee Way

City State Zip Code  
Glendale CA 91208

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

Name of Employer Occupation  
Porto's Bakery Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6213164**

Amount of Each Receipt this Period  
 2000.00

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

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

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Janet L. Powell**

Mailing Address 506 Wythe Street

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Law Offices of Baker Donelson Bearman Senior Public Policy Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 14 / 2013

**Transaction ID : C6207223**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 3500 Viewcrest Dr.

City State Zip Code  
Burbank CA 91504

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

Name of Employer Occupation  
Century 21 Real Estate Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 15 / 2013

**Transaction ID : C6207126**

Amount of Each Receipt this Period  
450.00

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

Mailing Address 3500 Viewcrest Dr.

City State Zip Code  
Burbank CA 91504

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

Name of Employer Occupation  
Century 21 Real Estate Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 15 / 2013

**Transaction ID : C6213077**

Amount of Each Receipt this Period  
150.00

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

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

900.00

**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 30 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 331 W. Wilson Ave., Unit 102

City: Glendale State: CA Zip Code: 91203

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

Name of Employer: Auto World Occupation: Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: 11 / 15 / 2013

**Transaction ID : C6207108**

Amount of Each Receipt this Period: 600.00

**B.** Full Name (Last, First, Middle Initial)  
**Lawrence E. Silverton**

Mailing Address 17001 Ventura Blvd.

City: Encino State: CA Zip Code: 91316

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

Name of Employer: Self-Employed Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 12 / 15 / 2013

**Transaction ID : C6207041**

Amount of Each Receipt this Period: 600.00

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

Mailing Address 17001 Ventura Blvd.

City: Encino State: CA Zip Code: 91316

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

Name of Employer: Self-Employed Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 12 / 15 / 2013

**Transaction ID : C6207042**

Amount of Each Receipt this Period: 2600.00

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

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

3800.00

**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 31 OF 105
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>Odom Stamps</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 14 / 2013
Mailing Address 318 Fairview Avenue		<b>Transaction ID : C6207219</b>
City South Pasadena	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Stamps & Stamps	Occupation Architectural Design	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) <b>William Hobson Stone</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 6249 30th St. NW		<b>Transaction ID : C6219741</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Denny Miller Assoc.	Occupation Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Young Seok Suh</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 2980 Hawkridge Dr.		<b>Transaction ID : C6213099</b>
City La Crescenta	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician/ Anesthesiology	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 3800 Shadow Grove Rd.

City Pasadena State CA Zip Code 91107

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

Name of Employer Eureka Aerospace, Inc. Occupation President/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : C6219393**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3800 Shadow Grove Rd.

City Pasadena State CA Zip Code 91107

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

Name of Employer Eureka Aerospace, Inc. Occupation President/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : C6219394**

Amount of Each Receipt this Period  
2400.00

**C.** Full Name (Last, First, Middle Initial)  
**Stanley M. Toy Jr.**

Mailing Address 1200 S. Oak Knoll Ave.

City Pasadena State CA Zip Code 91106

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

Name of Employer Cal Western Emergency Medical Group Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6213173**

Amount of Each Receipt this Period  
1500.00

**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 33 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 2444 Saybrook Ave.

City Los Angeles State CA Zip Code 90040

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

Name of Employer Asian Food Trade Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6207234**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1701 S. Atlantic Blvd., #1

City Alhambra State CA Zip Code 91803

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

Name of Employer Cinema Systems Occupation Executive Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6207236**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1078 Trafalgar Dr.

City Glendale State CA Zip Code 91207

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

Name of Employer Vartanian Enterprises Occupation Office Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207192**

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: PAGE 34 OF 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

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

Mailing Address 1975 Rimcrest Dr.

City State Zip Code  
Glendale CA 91207-1043

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

Name of Employer Occupation  
Onik's Shoes Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : C6207112**

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
**Anthony Wai Kong Wong**

Mailing Address 236 E. Garvey Ave.

City State Zip Code  
Monterey Park CA 91755

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

Name of Employer Occupation  
Concord Realty, Inc. Realtor/President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6213161**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 429 N. Campbell Ave.

City State Zip Code  
Alhambra CA 91801

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

Name of Employer Occupation  
Tri-Star Vending President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : C6219374**

Amount of Each Receipt this Period  
850.00

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

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

1950.00

**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 35 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 4261 Beulah Dr.

City State Zip Code  
La Canada Flintridge CA 91011

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 15 / 2013

**Transaction ID : C6207200**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 303 E. Elmwood Ave., Unit 301

City State Zip Code  
Burbank CA 91502

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

Name of Employer Occupation  
Nairas Supportive Service Inc. Health Care supply

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 15 / 2013

**Transaction ID : C6213051**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 909 W. College St.

City State Zip Code  
Los Angeles CA 90012

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

Name of Employer Occupation  
California State University LA Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 01 / 2013

**Transaction ID : C6219383**

Amount of Each Receipt this Period  
500.00

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

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

1100.00

**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 36 OF 105			
	<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)  
**Schiff for Congress**

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

Mailing Address 836 Harrington Rd.

City: Glendale State: CA Zip Code: 91207

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

Name of Employer: Athens Services Occupation: Controller

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 15 / 2013

**Transaction ID : C6213052**

Amount of Each Receipt this Period: 300.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

300.00

72801.86

**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 37 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**3M Company PAC**

Mailing Address 3M Center

City Saint Paul State MN Zip Code 55144

FEC ID number of contributing federal political committee. **C C00084475**

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 / 23 / 2013

**Transaction ID : C6219731**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1625 L Street NW

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  
 11 / 01 / 2013

**Transaction ID : C6219382**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Amalgamated Transit Union COPE PAC**

Mailing Address 5025 Wisconsin Avenue, NW

City Washington State DC Zip Code 20016-4139

FEC ID number of contributing federal political committee. **C C00032995**

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 / 07 / 2013

**Transaction ID : C6125506**

Amount of Each Receipt this Period  
 2000.00

**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 38 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Assn. For Justice PAC (AAJ PAC)**

Mailing Address 777 6th St., NW Ste. 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  
10000.00

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

**Transaction ID : C6219744**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**American Assn. For Justice PAC (AAJ PAC)**

Mailing Address 777 6th St., NW Ste. 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  
10000.00

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

**Transaction ID : C6219743**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Bankers Assn. (BANKPAC)**

Mailing Address 1120 Connecticut Ave., NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2013

**Transaction ID : C6207230**

Amount of Each Receipt this Period  
1500.00

**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 39 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Hospital Assn. PAC**

Mailing Address 325 Seventh St., N.W., Suite 700

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00106146

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 4000.00

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

**Transaction ID : C6219737**

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

**B.** Full Name (Last, First, Middle Initial)  
**American Optometric Assoc. PAC (AOA-PAC)**

Mailing Address 1505 Prince Street, Suite 300

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00024968

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1500.00

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

**Transaction ID : C6219738**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**American Physical Therapy PAC**

Mailing Address 1111 N. Fairfax St.

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  
 \_\_\_\_\_ 1000.00

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

**Transaction ID : C6208079**

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 40 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 208 S. Akard St., Ste. 3521

City State Zip Code  
Dallas TX 75202

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

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

**Transaction ID : C6219747**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1501 K St., NW Ste. 375

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00117838

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  
 12 / 23 / 2013

**Transaction ID : C6219735**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address P.O. Box 961039

City State Zip Code  
Fort Worth TX 76161

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : C6219726**

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 41 OF 105
	<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)  
**Schiff for Congress**

**A. Boeing PAC**

Full Name (Last, First, Middle Initial)  
Boeing PAC

Mailing Address 1200 Wilson Boulevard

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

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  
12 / 17 / 2013

**Transaction ID : C6205480**

Amount of Each Receipt this Period  
4000.00

**B. Bristol - Myers Squibb Company Employee PAC**

Full Name (Last, First, Middle Initial)  
Bristol - Myers Squibb Company Employee PAC

Mailing Address 345 Park Ave., 11th Floor

City State Zip Code  
New York NY 10154

FEC ID number of contributing federal political committee. **C** C00035675

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  
12 / 23 / 2013

**Transaction ID : C6219734**

Amount of Each Receipt this Period  
1000.00

**C. Build PAC - Nat'l Assoc. of Home Builders**

Full Name (Last, First, Middle Initial)  
Build PAC - Nat'l Assoc. of Home Builders

Mailing Address 1201 15th Street NW

City State Zip Code  
Washington DC 20005-2800

FEC ID number of contributing federal political committee. **C** C00000901

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  
12 / 23 / 2013

**Transaction ID : C6219727**

Amount of Each Receipt this Period  
1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cacciotti for City Council 2013**

Mailing Address 3700 Wilshire Blvd., Ste. 1050 B

City Los Angeles	State CA	Zip Code 90010
---------------------	-------------	-------------------

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		14		2013

**Transaction ID : C6207218**

Amount of Each Receipt this Period  
450.00

**B.** Full Name (Last, First, Middle Initial)  
**Carpenters' Legislative Improvement Committee**

Mailing Address 101 Constitution Avenue, NW, 10th

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00001016

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
12		30		2013

**Transaction ID : C6219717**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Comm. on Letter Carriers Political Education PAC**

Mailing Address 100 Indiana Avenue, NW

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00023580

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		31		2013

**Transaction ID : C6219719**

Amount of Each Receipt this Period  
1500.00

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

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

4450.00

**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 43 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CULAC the PAC of Credit Union Nat'l Assn.**

Mailing Address 601 Pennsylvania Avenue, NW  
South Building, Suite 600

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  
3000.00

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

**Transaction ID : C6170885**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CULAC the PAC of Credit Union Nat'l Assn.**

Mailing Address 601 Pennsylvania Avenue, NW  
South Building, Suite 600

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  
3000.00

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

**Transaction ID : C6208077**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dealers Elect. Action Comm. of the NADA PAC**

Mailing Address 8400 Westpark Drive

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  
5000.00

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

**Transaction ID : C6208076**

Amount of Each Receipt this Period  
5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 105
	<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)  
**Schiff for Congress**

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

Mailing Address 2244 Walnut Grove Ave.

City State Zip Code  
Rosemead CA 91770

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 07 / 2013

**Transaction ID : C6170886**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2980 Fairview Park Dr.

City State Zip Code  
Falls Church VA 22042

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : C6219746**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Human Rights Campaign PAC**

Mailing Address 1640 Rhode Island Avenue, NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00235853

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 / 23 / 2013

**Transaction ID : C6219736**

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 45 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Int'l Assn. of Fire Fighters - FIREPAC**

Mailing Address 1750 New York Ave. NW

City Washington State DC Zip Code 20006

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 Y  
 12 / 31 / 2013

**Transaction ID : C6219724**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ironworkers Political Action League**

Mailing Address 1750 New York Avenue, N.W.

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : C6219722**

Amount of Each Receipt this Period  
 4800.00

**C.** Full Name (Last, First, Middle Initial)  
**Life Technologies Corporation Employees PAC**

Mailing Address 1050 K St. N.W., Ste. 310

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00404442

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 / 23 / 2013

**Transaction ID : C6219730**

Amount of Each Receipt this Period  
 1500.00

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

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

7300.00

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

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

FOR LINE NUMBER: PAGE 46 OF 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees PAC**

Mailing Address 2121 Crystal Dr., Ste. 100

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

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

**Transaction ID : C6188207**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**National Air Traffic Controllers Assn. PAC**

Mailing Address 1325 Massachusetts Ave., NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

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  
 12 / 23 / 2013

**Transaction ID : C6219728**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**National Association of Insurance and Financial Advisors**

Mailing Address 2901 Telestar Court

City State Zip Code  
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

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  
 12 / 23 / 2013

**Transaction ID : C6219739**

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: PAGE 47 OF 105  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

**A. National Beer Wholesalers Assn. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 King St., Ste. 600  
 City State Zip Code  
 Alexandria VA 22314  
 FEC ID number of contributing federal political committee. **C C00144766**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 23 2013  
**Transaction ID : C6219732**  
 Amount of Each Receipt this Period  
 2500.00

**B. National Community of Pharmacists Assn. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Daingerfield Rd.  
 City State Zip Code  
 Alexandria VA 22314  
 FEC ID number of contributing federal political committee. **C C00030809**  
 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 13 2013  
**Transaction ID : C6203829**  
 Amount of Each Receipt this Period  
 2500.00

**C. National Emergency Medicine PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 Executive Circle  
 City State Zip Code  
 Irving TX 75038-2522  
 FEC ID number of contributing federal political committee. **C C00140061**  
 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 31 2013  
**Transaction ID : C6219725**  
 Amount of Each Receipt this Period  
 2500.00

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

7500.00

**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 48 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Parsons Brinckerhoff, Inc. PAC**

Mailing Address One Penn Plaza

City State Zip Code  
New York NY 10119

FEC ID number of contributing federal political committee. **C C00287003**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2013

**Transaction ID : C6207220**

Amount of Each Receipt this Period  
450.00

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

Mailing Address 100 W. Walnut Street

City State Zip Code  
Pasadena CA 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  
5000.00

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

**Transaction ID : C6219742**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1100 Wilson Blvd., Suite 1500

City State Zip Code  
Arlington VA 22209-2297

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 13 / 2013

**Transaction ID : C6185067**

Amount of Each Receipt this Period  
2000.00

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

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

3450.00



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

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

FOR LINE NUMBER: PAGE 49 OF 105  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

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

Mailing Address 1100 Wilson Blvd., Suite 1500

City State Zip Code  
Arlington VA 22209-2297

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 13 / 2013

**Transaction ID : C6185069**

Amount of Each Receipt this Period  
3000.00

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

Mailing Address 1100 Wilson Blvd., Suite 1500

City State Zip Code  
Arlington VA 22209-2297

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 03 / 2013

**Transaction ID : C6194467**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Sheet Metal Workers' Int'l. Assoc. PAC**

Mailing Address 1750 New York Avenue, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C C00007542**

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 / 09 / 2013

**Transaction ID : C6219376**

Amount of Each Receipt this Period  
2500.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 105
	<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)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Southern California Armenian Democrats**

Mailing Address 1427 Lincoln Blvd., Ste. E

City Santa Monica State CA Zip Code 90401

FEC ID number of contributing federal political committee. **C** C00491316

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2013

**Transaction ID : C6125622**

Amount of Each Receipt this Period  
 -100.00

**B.** Full Name (Last, First, Middle Initial)  
**Southern Wine & Spirits PAC**

Mailing Address 1600 NW 163rd Street

City Miami State FL Zip Code 33169

FEC ID number of contributing federal political committee. **C** C00217877

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 Y  
 12 / 23 / 2013

**Transaction ID : C6219733**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**The 21st Century Leadership Fund**

Mailing Address 2700 Coast Ave.

City Mountain View State CA Zip Code 94043

FEC ID number of contributing federal political committee. **C** C00361741

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

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

**Transaction ID : C6219729**

Amount of Each Receipt this Period  
 1000.00

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 51 OF 105  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**U.S. Travel Association PAC**

Mailing Address 1100 New York Ave. NW, Ste. 450W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00457754

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 / 31 / 2013

**Transaction ID : C6219718**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2500.00

77100.00

# 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 52 OF 105
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**State Compensation Insurance Fund**

Mailing Address P.O. Box 7854

City San Francisco State CA Zip Code 94120-7854

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**319.10**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 21 / 2013**

**Transaction ID : C6149356**

Amount of Each Receipt this Period  
**81.29**

Refund

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**81.29**

**81.29**

**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 53 OF 105
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**California Bank & Trust**

Mailing Address 550 S. Hope Street, Suite 100

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**759.04**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2013**

**Transaction ID : C6216836**

Amount of Each Receipt this Period  
**55.26**

Interest

**B.** Full Name (Last, First, Middle Initial)  
**California Bank & Trust**

Mailing Address 550 S. Hope Street, Suite 100

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**759.04**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 30 / 2013**

**Transaction ID : C6216837**

Amount of Each Receipt this Period  
**51.70**

Interest

**C.** Full Name (Last, First, Middle Initial)  
**California Bank & Trust**

Mailing Address 550 S. Hope Street, Suite 100

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**759.04**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2013**

**Transaction ID : C6216838**

Amount of Each Receipt this Period  
**57.05**

Interest

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>164.01</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 105
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. City National Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2013
Mailing Address 525 South Flower Street		<b>Transaction ID : C6216839</b>
City Los Angeles	State Zip Code CA 90071	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 21.28
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 292.32	

Full Name (Last, First, Middle Initial) <b>B. City National Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2013
Mailing Address 525 South Flower Street		<b>Transaction ID : C6216840</b>
City Los Angeles	State Zip Code CA 90071	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 19.91
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 292.32	

Full Name (Last, First, Middle Initial) <b>C. City National Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 525 South Flower Street		<b>Transaction ID : C6216841</b>
City Los Angeles	State Zip Code CA 90071	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 21.97
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 292.32	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	63.16
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 55 OF 105
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>Proamerica Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2013
Mailing Address 888 S Figueroa St. # 100		<b>Transaction ID : C6216842</b>
City Los Angeles	State CA	Zip Code 90017
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 42.75	
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 852.61	

Full Name (Last, First, Middle Initial) <b>Proamerica Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2013
Mailing Address 888 S Figueroa St. # 100		<b>Transaction ID : C6216843</b>
City Los Angeles	State CA	Zip Code 90017
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 41.38	
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 852.61	

Full Name (Last, First, Middle Initial) <b>Proamerica Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 888 S Figueroa St. # 100		<b>Transaction ID : C6216844</b>
City Los Angeles	State CA	Zip Code 90017
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 42.77	
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 852.61	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	126.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 105
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Schwab-Heller**

Mailing Address 11835 West Olympic Blvd., Suite 36

City Los Angeles	State CA	Zip Code 90064
---------------------	-------------	-------------------

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
352.80

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		31		2013

**Transaction ID : C6216845**

Amount of Each Receipt this Period  
2.03

Interest

**B.** Full Name (Last, First, Middle Initial)  
**Schwab-Heller**

Mailing Address 11835 West Olympic Blvd., Suite 36

City Los Angeles	State CA	Zip Code 90064
---------------------	-------------	-------------------

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
352.80

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		30		2013

**Transaction ID : C6216846**

Amount of Each Receipt this Period  
1.40

Interest

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

Mailing Address 601 W. 5th Street, Suite 100

City Los Angeles	State CA	Zip Code 90071
---------------------	-------------	-------------------

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
585.79

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		31		2013

**Transaction ID : C6216847**

Amount of Each Receipt this Period  
42.66

Interest

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

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

46.09



**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 57 OF 105
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>Torrey Pines Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2013
Mailing Address 601 W. 5th Street, Suite 100		<b>Transaction ID : C6216848</b>
City Los Angeles	State CA	Zip Code 90071
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 39.91	
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 585.79	

Full Name (Last, First, Middle Initial) <b>Torrey Pines Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 601 W. 5th Street, Suite 100		<b>Transaction ID : C6216849</b>
City Los Angeles	State CA	Zip Code 90071
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 44.05	
Name of Employer	Occupation	Interest
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 585.79	

Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period	
Name of Employer	Occupation	Interest
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	83.96
<b>TOTAL</b> This Period (last page this line number only).....	484.12

**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 58 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anthem Blue Cross</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address P.O. Box 54010			Amount of Each Disbursement this Period 1383.00 <b>Transaction ID : D328204</b>
City Los Angeles	State CA	Zip Code 90054-0010	
Purpose of Disbursement Insurance	Candidate Name		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>B. Anthem Blue Cross</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address P.O. Box 54010			Amount of Each Disbursement this Period 1383.00 <b>Transaction ID : D328205</b>
City Los Angeles	State CA	Zip Code 90054-0010	
Purpose of Disbursement Insurance	Candidate Name		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>C. Anthem Blue Cross</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address P.O. Box 54010			Amount of Each Disbursement this Period 1383.00 <b>Transaction ID : D328206</b>
City Los Angeles	State CA	Zip Code 90054-0010	
Purpose of Disbursement Insurance	Candidate Name		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4149.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 105	
	<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)  
**Schiff for Congress**

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

Mailing Address 5105 Hollywood Blvd.

City Hollywood State CA Zip Code 90027

Purpose of Disbursement  
Photography Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
300.00

Transaction ID : D328249

Category/Type

Full Name (Last, First, Middle Initial)  
**B. Creative Catering LA**

Mailing Address 1018 E. Colorado Blvd.

City Glendale State CA Zip Code 91205

Purpose of Disbursement  
Catering Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 13 / 2013

Amount of Each Disbursement this Period  
4599.00

Transaction ID : D328253

Category/Type

Full Name (Last, First, Middle Initial)  
**c. Design by Ashley**

Mailing Address 716 1/2 North Glendale Avenue

City Glendale State CA Zip Code 91206

Purpose of Disbursement  
Fundraising Event Flowers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 13 / 2013

Amount of Each Disbursement this Period  
550.00

Transaction ID : D328254

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 5449.00

**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 60 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. EDD</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2013</b>
Mailing Address <b>800 Capitol Mall - MIC 83</b>		Amount of Each Disbursement this Period <b>45.52</b>
City <b>Sacramento</b> State <b>CA</b> Zip Code <b>95814</b>	Purpose of Disbursement <b>Payroll Taxes</b>	
Candidate Name		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)	<b>Transaction ID : D328174</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EDD</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2013</b>
Mailing Address <b>800 Capitol Mall - MIC 83</b>		Amount of Each Disbursement this Period <b>45.52</b>
City <b>Sacramento</b> State <b>CA</b> Zip Code <b>95814</b>	Purpose of Disbursement <b>Payroll Taxes</b>	
Candidate Name		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)	<b>Transaction ID : D328175</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EDD</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 15 / 2013</b>
Mailing Address <b>800 Capitol Mall - MIC 83</b>		Amount of Each Disbursement this Period <b>45.52</b>
City <b>Sacramento</b> State <b>CA</b> Zip Code <b>95814</b>	Purpose of Disbursement <b>Payroll Taxes</b>	
Candidate Name		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)	<b>Transaction ID : D328176</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>136.56</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 105			
	<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)  
**Schiff for Congress**

**A. EDD**

Full Name (Last, First, Middle Initial)

Mailing Address 800 Capitol Mall - MIC 83

City Sacramento State CA Zip Code 95814

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 29 / 2013

Amount of Each Disbursement this Period: 45.52

Transaction ID : D328177

**B. EDD**

Full Name (Last, First, Middle Initial)

Mailing Address 800 Capitol Mall - MIC 83

City Sacramento State CA Zip Code 95814

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 13 / 2013

Amount of Each Disbursement this Period: 45.52

Transaction ID : D328178

**C. EDD**

Full Name (Last, First, Middle Initial)

Mailing Address 800 Capitol Mall - MIC 83

City Sacramento State CA Zip Code 95814

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 38.49

Transaction ID : D328179

**SUBTOTAL** of Disbursements This Page (optional) ..... 129.53

**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 62 OF 105	
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. EDD</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 800 Capitol Mall - MIC 83		Amount of Each Disbursement this Period 45.52
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	<b>Transaction ID : D328180</b>
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>B. Erickson &amp; Company, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 38 Ivy Street SE		Amount of Each Disbursement this Period 3500.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consulting Fee	
Candidate Name	Category/Type	<b>Transaction ID : D328146</b>
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>c. Erickson &amp; Company, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 38 Ivy Street SE		Amount of Each Disbursement this Period 82.53
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consulting Expenses	
Candidate Name	Category/Type	<b>Transaction ID : D328147</b>
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3628.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Erickson &amp; Company, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013	
Mailing Address 38 Ivy Street SE			Amount of Each Disbursement this Period 3500.00	
City Washington	State DC	Zip Code 20003	Transaction ID : D328148	
Purpose of Disbursement Fundraising Consulting Fee		Category/ Type		
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>B. Erickson &amp; Company, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013	
Mailing Address 38 Ivy Street SE			Amount of Each Disbursement this Period 154.26	
City Washington	State DC	Zip Code 20003	Transaction ID : D328149	
Purpose of Disbursement Fundraising Consulting Expenses		Category/ Type		
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>C. Erickson &amp; Company, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013	
Mailing Address 38 Ivy Street SE			Amount of Each Disbursement this Period 3500.00	
City Washington	State DC	Zip Code 20003	Transaction ID : D328150	
Purpose of Disbursement Fundraising Consulting Fee		Category/ Type		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7154.26
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Erickson &amp; Company, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 38 Ivy Street SE		Amount of Each Disbursement this Period 217.75 <b>Transaction ID : D328151</b>
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraising Consulting Expenses		Category/ Type
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>B. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 56.63 <b>Transaction ID : D328256</b>
City Fort Lauderdale	State FL Zip Code 33314	
Purpose of Disbursement Merchant Fees		Category/ Type
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>C. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 68.63 <b>Transaction ID : D328257</b>
City Fort Lauderdale	State FL Zip Code 33314	
Purpose of Disbursement Merchant Fees		Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	343.01
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 3.53 <b>Transaction ID : D328258</b>
City Fort Lauderdale	State FL	
Zip Code 33314	Purpose of Disbursement Merchant Fees	Category/ Type
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>B. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 13.20 <b>Transaction ID : D328259</b>
City Fort Lauderdale	State FL	
Zip Code 33314	Purpose of Disbursement Merchant Fees	Category/ Type
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>C. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 103.05 <b>Transaction ID : D328260</b>
City Fort Lauderdale	State FL	
Zip Code 33314	Purpose of Disbursement Merchant Fees	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	119.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 28.47
City Fort Lauderdale	State FL	
Zip Code 33314	Purpose of Disbursement Merchant Fees	Transaction ID : D328261
Candidate Name	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>B. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 225.99
City Fort Lauderdale	State FL	
Zip Code 33314	Purpose of Disbursement Merchant Fees	Transaction ID : D328262
Candidate Name	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>C. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 120.04
City Fort Lauderdale	State FL	
Zip Code 33314	Purpose of Disbursement Merchant Fees	Transaction ID : D328263
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	374.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address PO Box 407066		Amount of Each Disbursement this Period 117.56 <b>Transaction ID : D328264</b>
City Fort Lauderdale	State FL	
Zip Code 33314	Purpose of Disbursement Merchant Fees	Category/ Type
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>B. Five Star Seafood</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 140 W. Valley Blvd.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D328265</b>
City San Gabriel	State CA	
Zip Code 91755	Purpose of Disbursement Fundraising Event Facility Rental Fees	Category/ Type
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>c. Franchise Tax Board</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address P.O. Box 942857		Amount of Each Disbursement this Period 80.00 <b>Transaction ID : D328166</b>
City Sacramento	State CA	
Zip Code 94257-0501	Purpose of Disbursement Taxes	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1197.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 105			
	<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)  
**Schiff for Congress**

**A. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address Payment Center

City Ogden State UT Zip Code 84201

Purpose of Disbursement Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 15 / 2013

Amount of Each Disbursement this Period: 616.88

Transaction ID : D328167

**B. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address Payment Center

City Ogden State UT Zip Code 84201

Purpose of Disbursement Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2013

Amount of Each Disbursement this Period: 616.88

Transaction ID : D328168

**C. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address Payment Center

City Ogden State UT Zip Code 84201

Purpose of Disbursement Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 15 / 2013

Amount of Each Disbursement this Period: 616.88

Transaction ID : D328169

**SUBTOTAL** of Disbursements This Page (optional) ..... 1850.64

**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 69 OF 105			
	<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)  
**Schiff for Congress**

**A. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address Payment Center

City Ogden State UT Zip Code 84201

Purpose of Disbursement Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 29 / 2013

Amount of Each Disbursement this Period: 616.88

Transaction ID : D328170

**B. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address Payment Center

City Ogden State UT Zip Code 84201

Purpose of Disbursement Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 13 / 2013

Amount of Each Disbursement this Period: 616.88

Transaction ID : D328171

**c. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address Payment Center

City Ogden State UT Zip Code 84201

Purpose of Disbursement Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 521.86

Transaction ID : D328172

**SUBTOTAL** of Disbursements This Page (optional) ..... 1755.62

**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 70 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address Payment Center		Amount of Each Disbursement this Period 616.88 <b>Transaction ID : D328173</b>
City Ogden	State UT	
Zip Code 84201	Purpose of Disbursement Taxes	Category/ Type
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>B. Mark Kadesh</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 147 Tennessee Ave. NE		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : D326708</b>
City Washington	State DC	
Zip Code 20002-6425	Purpose of Disbursement Facility Rental Fees	Category/ Type
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:	* In-Kind Received

Full Name (Last, First, Middle Initial) <b>c. Mark Kadesh</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 147 Tennessee Ave. NE		Amount of Each Disbursement this Period 151.86 <b>Transaction ID : D326709</b>
City Washington	State DC	
Zip Code 20002-6425	Purpose of Disbursement Food & Beverages	Category/ Type
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:	* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	918.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 105			
	<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)  
**Schiff for Congress**

**A. Kaufman Legal Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 777 S. Figueroa St. Ste. 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement  
Legal & Treasury Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 01 / 2013

Amount of Each Disbursement this Period  
1925.00

Transaction ID : D328133

**B. Kaufman Legal Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 777 S. Figueroa St. Ste. 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement  
Legal & Treasury Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 01 / 2013

Amount of Each Disbursement this Period  
1925.00

Transaction ID : D328134

**C. Kaufman Legal Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 777 S. Figueroa St. Ste. 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement  
Legal & Treasury Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
1925.00

Transaction ID : D328135

**SUBTOTAL** of Disbursements This Page (optional) ..... 5775.00

**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 72 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kaufman Legal Group</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 777 S. Figueroa St. Ste. 4050		Amount of Each Disbursement this Period 279.50
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Legal & Treasury Expenses	Transaction ID : D328136
Candidate Name	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>B. Merchant Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013
Mailing Address 808 East Utah Valley Dr.		Amount of Each Disbursement this Period 25.00
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Merchant Fees	Transaction ID : D328271
Candidate Name	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>c. Merchant Bankcard</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2013
Mailing Address 808 East Utah Valley Dr.		Amount of Each Disbursement this Period 25.00
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Merchant Fees	Transaction ID : D328272
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	329.50
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 105	
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Merchant Bankcard</b>		M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 808 East Utah Valley Dr.		Amount of Each Disbursement this Period
City American Fork State UT Zip Code 84003		25.00
Purpose of Disbursement Merchant Fees		Transaction ID : D328273
Candidate Name		Category/Type
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	
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)		Date of Disbursement
<b>B. Momentous Insurance Brokerage Inc.</b>		M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 5990 Sepulveda Blvd., Ste. # 550		Amount of Each Disbursement this Period
City Van Nuys State CA Zip Code 91411		974.80
Purpose of Disbursement Insurance Premium Expense		Transaction ID : D328207
Candidate Name		Category/Type
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	
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)		Date of Disbursement
<b>C. NGP VAN, Inc.</b>		M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 1225 Eye Street NW, Ste. 1225		Amount of Each Disbursement this Period
City Washigton State DC Zip Code 20005		4200.00
Purpose of Disbursement Database Licensing		Transaction ID : D328230
Candidate Name		Category/Type
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5199.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Palladio</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 1018 E. Colorado Blvd.		Amount of Each Disbursement this Period 6677.00
City Glendale	State CA	
Zip Code 91205	Purpose of Disbursement Fundraising Event Facility Rental Fees	Transaction ID : D328274
Candidate Name	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>B. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 2365.26
City Glendale	State CA	
Zip Code 91208	Purpose of Disbursement Salary	Transaction ID : D328211
Candidate Name	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>C. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 2365.26
City Glendale	State CA	
Zip Code 91208	Purpose of Disbursement Salary	Transaction ID : D328212
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11407.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 2365.26 <b>Transaction ID : D328213</b>
City Glendale	State CA	
Purpose of Disbursement Salary	Candidate Name	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>B. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 2365.26 <b>Transaction ID : D328215</b>
City Glendale	State CA	
Purpose of Disbursement Salary	Candidate Name	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>C. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 2365.26 <b>Transaction ID : D328216</b>
City Glendale	State CA	
Purpose of Disbursement Salary	Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7095.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : D328217</b>
City Glendale	State CA	
Purpose of Disbursement Salary		Category/ Type
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>B. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 2365.26 <b>Transaction ID : D328218</b>
City Glendale	State CA	
Purpose of Disbursement Salary		Category/ Type
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>C. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 184.95 <b>Transaction ID : D328294</b>
City Glendale	State CA	
Purpose of Disbursement Reimb. Health Insurance. No Memo Item.		Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4550.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 274.50 <b>Transaction ID : D328296</b>
City Glendale	State CA	
Zip Code 91208	Purpose of Disbursement Reimb. Office Supplies. No Memo Item.	Category/ Type
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>B. River City Business Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013
Mailing Address 5435 Madison Avenue		Amount of Each Disbursement this Period 58.00 <b>Transaction ID : D328139</b>
City Sacramento	State CA	
Zip Code 95841	Purpose of Disbursement Payroll Services	Category/ Type
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>C. River City Business Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 5435 Madison Avenue		Amount of Each Disbursement this Period 58.00 <b>Transaction ID : D328140</b>
City Sacramento	State CA	
Zip Code 95841	Purpose of Disbursement Payroll Services	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	274.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. River City Business Services</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 5435 Madison Avenue			Amount of Each Disbursement this Period 58.00 <b>Transaction ID : D328141</b>
City Sacramento	State CA	Zip Code 95841	
Purpose of Disbursement Payroll Services	Candidate Name		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>B. River City Business Services</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 5435 Madison Avenue			Amount of Each Disbursement this Period 58.00 <b>Transaction ID : D328142</b>
City Sacramento	State CA	Zip Code 95841	
Purpose of Disbursement Payroll Services	Candidate Name		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>C. River City Business Services</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 5435 Madison Avenue			Amount of Each Disbursement this Period 58.00 <b>Transaction ID : D328143</b>
City Sacramento	State CA	Zip Code 95841	
Purpose of Disbursement Payroll Services	Candidate Name		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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	174.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. River City Business Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 5435 Madison Avenue		Amount of Each Disbursement this Period 35.00
City Sacramento	State CA	
Zip Code 95841	Purpose of Disbursement Payroll Services	<b>Transaction ID : D328144</b>
Candidate Name	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>B. River City Business Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 5435 Madison Avenue		Amount of Each Disbursement this Period 58.00
City Sacramento	State CA	
Zip Code 95841	Purpose of Disbursement Payroll Services	<b>Transaction ID : D328145</b>
Candidate Name	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>c. The Kollaborative</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 5500 Hollywood Blvd. #400		Amount of Each Disbursement this Period 1000.00
City Los Angeles	State CA	
Zip Code 90028	Purpose of Disbursement Fundraising Facility Rental Fees	<b>Transaction ID : D328287</b>
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1093.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Thomas Realty</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 28 / 2013</b>
Mailing Address 150 E. Olive Ave., Suite 308		Amount of Each Disbursement this Period <b>1200.00</b> <b>Transaction ID : D328239</b>
City <b>Burbank</b>	State <b>CA</b>	
Zip Code <b>91502</b>	Purpose of Disbursement <b>Office Rental</b>	Category/ Type
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>B. Thomas Realty</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 25 / 2013</b>
Mailing Address 150 E. Olive Ave., Suite 308		Amount of Each Disbursement this Period <b>1200.00</b> <b>Transaction ID : D328240</b>
City <b>Burbank</b>	State <b>CA</b>	
Zip Code <b>91502</b>	Purpose of Disbursement <b>Office Rental</b>	Category/ Type
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>c. Thomas Realty</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 26 / 2013</b>
Mailing Address 150 E. Olive Ave., Suite 308		Amount of Each Disbursement this Period <b>1200.00</b> <b>Transaction ID : D328241</b>
City <b>Burbank</b>	State <b>CA</b>	
Zip Code <b>91502</b>	Purpose of Disbursement <b>Office Rental</b>	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Vasken Samuelian</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 1670 Gladys Drive		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : D328289</b>
City Glendale	State CA	
Purpose of Disbursement Event Entertainment Services		Category/ Type
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>B. Zachary Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 3328 Castera Avenue		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D328291</b>
City Glendale	State CA	
Purpose of Disbursement Photography Services		Category/ Type
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>c. Constant Contact</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 1601 Trapelo Rd.		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : D328209</b> <b>[MEMO ITEM]</b>
City Waltham	State MA	
Purpose of Disbursement Email Expense		Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Raymond Peifer</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013		
Mailing Address 1724 Easterly Terrace			Amount of Each Disbursement this Period 567.00		
City Los Angeles	State CA	Zip Code 90026	Transaction ID : <b>D328185</b>		
Purpose of Disbursement Reimb. Holiday Gift Expense. See Memo Item.		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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>B. See's Candy Shops</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013		
Mailing Address 141 S. Hacienda Blvd.			Amount of Each Disbursement this Period 567.00		
City Hacienda Heights	State CA	Zip Code 91745	Transaction ID : <b>D328301</b>		
Purpose of Disbursement Holiday Gift Expense		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. Chase Card Services</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013		
Mailing Address PO Box 94014			Amount of Each Disbursement this Period 20529.43		
City Palatine	State IL	Zip Code 60094-4014	Transaction ID : <b>D328199</b>		
Purpose of Disbursement Credit Card Payment. See Memo Item.		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	21096.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 171.12
City Phoenix	State AZ	
Zip Code 85062-8225	Purpose of Disbursement Telephone Expense	Transaction ID : D328156 <b>[MEMO ITEM]</b>
Candidate Name	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>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 40.00
City Phoenix	State AZ	
Zip Code 85062-8225	Purpose of Disbursement Telephone Expense	Transaction ID : D328157 <b>[MEMO ITEM]</b>
Candidate Name	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>c. Bistro Bis</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 15 E Street Northwest		Amount of Each Disbursement this Period 67.10
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Food & Beverage Expense	Transaction ID : D328137 <b>[MEMO ITEM]</b>
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Burbank Bar &amp; Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 112 North San Fernando Boulevard		Amount of Each Disbursement this Period 43.32
City Burbank State CA Zip Code 91502	Purpose of Disbursement Food & Beverage Expense	
Candidate Name		Transaction ID : D328237
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:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Capitol Host</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address Rm B-339B Rayburn House Bldg.		Amount of Each Disbursement this Period 246.00
City Washington State DC Zip Code 20515	Purpose of Disbursement Catering Expense	
Candidate Name		Transaction ID : D328198
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:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. Constant Contact</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 1601 Trapelo Rd.		Amount of Each Disbursement this Period 15.00
City Waltham State MA Zip Code 02451	Purpose of Disbursement Email Expense	
Candidate Name		Transaction ID : D328208
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:	Category/Type	[MEMO ITEM]

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Counterintuity LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 348 E. Olive Ave, Suite D		Amount of Each Disbursement this Period 109.00
City Burbank	State CA	
Purpose of Disbursement Technology Expense	Zip Code 91502	
Candidate Name	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>B. Counterintuity LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 348 E. Olive Ave, Suite D		Amount of Each Disbursement this Period 109.00
City Burbank	State CA	
Purpose of Disbursement Technology Expense	Zip Code 91502	
Candidate Name	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>c. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 116.18
City Memphis	State CA	
Purpose of Disbursement Postage/Shipping Expense	Zip Code 38101-1140	
Candidate Name	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:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 25.79
City Memphis	State CA	
Zip Code 38101-1140	Purpose of Disbursement Postage/Shipping Expense	Transaction ID : D328163 <b>[MEMO ITEM]</b>
Candidate Name	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>B. Levity Live</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 8162 Melrose Avenue		Amount of Each Disbursement this Period 4254.00
City Los Angeles	State CA	
Zip Code 90048	Purpose of Disbursement Fundraising Facility Rental Fees	Transaction ID : D328268 <b>[MEMO ITEM]</b>
Candidate Name	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>c. Levity Live</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 8162 Melrose Avenue		Amount of Each Disbursement this Period 12762.00
City Los Angeles	State CA	
Zip Code 90048	Purpose of Disbursement Fundraising Facility Rental Fees	Transaction ID : D328269 <b>[MEMO ITEM]</b>
Candidate Name	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:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lunar Pages</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 1360 N Hancock Street		Amount of Each Disbursement this Period 39.90
City Anaheim State CA Zip Code 92807	Purpose of Disbursement Web/Technology Expense	
Candidate Name	Category/Type	Transaction ID : D328221 <b>[MEMO ITEM]</b>
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>B. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period 10.00
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Food and Beverage Expense	
Candidate Name	Category/Type	Transaction ID : D328152 <b>[MEMO ITEM]</b>
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>c. Taeji Sushi</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address 13967 Antonia Ford Court		Amount of Each Disbursement this Period 903.30
City Centreville State VA Zip Code 20121	Purpose of Disbursement Fundraising Catering Services	
Candidate Name	Category/Type	Transaction ID : D328283 <b>[MEMO ITEM]</b>
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:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 20.00
City Mission Hills	State CA	Zip Code 91346
Purpose of Disbursement Telephone Expense	Category/ Type	
Candidate Name	Transaction ID : D328187	
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:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 716.39
City Mission Hills	State CA	Zip Code 91346
Purpose of Disbursement Telephone Expense	Category/ Type	
Candidate Name	Transaction ID : D328188	
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:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 127.64
City Mission Hills	State CA	Zip Code 91346
Purpose of Disbursement Telephone Expense	Category/ Type	
Candidate Name	Transaction ID : D328189	
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:	[MEMO ITEM]	

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chase Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address PO Box 94014		Amount of Each Disbursement this Period 2091.06 <b>Transaction ID : D328200</b>
City Palatine	State IL	
Zip Code 60094-4014	Purpose of Disbursement Credit Card Payment. See Memo Item.	Category/ Type
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>B. Another Broken Egg Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 250 E. Olive Ave., #110		Amount of Each Disbursement this Period 41.72 <b>Transaction ID : D328232</b> <b>[MEMO ITEM]</b>
City Burbank	State CA	
Zip Code 91502	Purpose of Disbursement Food and Beverage Expense	Category/ Type
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>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 170.31 <b>Transaction ID : D328158</b> <b>[MEMO ITEM]</b>
City Phoenix	State AZ	
Zip Code 85062-8225	Purpose of Disbursement Telephone Expense	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2091.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 40.00
City Phoenix	State AZ	
Zip Code 85062-8225	Purpose of Disbursement Telephone Expense	Transaction ID : D328159 <b>[MEMO ITEM]</b>
Candidate Name	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>B. City of Burbank</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 275 East Olive Avenue		Amount of Each Disbursement this Period 485.71
City Burbank	State CA	
Zip Code 91502	Purpose of Disbursement Utilities	Transaction ID : D328243 <b>[MEMO ITEM]</b>
Candidate Name	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>c. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 29.52
City Memphis	State CA	
Zip Code 38101-1140	Purpose of Disbursement Postage/Shipping Expense	Transaction ID : D328164 <b>[MEMO ITEM]</b>
Candidate Name	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:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. Federal Express</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>13</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		13		2013
M M	/	D D	/	Y Y Y Y								
11		13		2013								
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>CA</td> <td>38101-1140</td> </tr> </table>		City	State	Zip Code	Memphis	CA	38101-1140	<table border="1"> <tr> <td>69.86</td> </tr> </table>	69.86			
City	State	Zip Code										
Memphis	CA	38101-1140										
69.86												
Purpose of Disbursement Postage/Shipping Expense		Transaction ID : D328165										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For: 2014											
<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)		Date of Disbursement										
<b>B. House Gift Shop</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>13</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		13		2013
M M	/	D D	/	Y Y Y Y								
11		13		2013								
Mailing Address 40 P Street Southeast		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20003</td> </tr> </table>		City	State	Zip Code	Washington	DC	20003	<table border="1"> <tr> <td>180.00</td> </tr> </table>	180.00			
City	State	Zip Code										
Washington	DC	20003										
180.00												
Purpose of Disbursement Office Supplies		Transaction ID : D328131										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For: 2014											
<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)		Date of Disbursement										
<b>C. National Democratic Club</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>13</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		13		2013
M M	/	D D	/	Y Y Y Y								
11		13		2013								
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20003-4071</td> </tr> </table>		City	State	Zip Code	Washington	DC	20003-4071	<table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00			
City	State	Zip Code										
Washington	DC	20003-4071										
10.00												
Purpose of Disbursement Food and Beverage Expense		Transaction ID : D328153										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For: 2014											
<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:												

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 105	
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period 77.13
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Food and Beverage Expense	
Candidate Name	Category/Type	Transaction ID : D328154 <b>[MEMO ITEM]</b>
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>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 1130 E. Colorado Blvd.		Amount of Each Disbursement this Period 24.47
City Pasadena State CA Zip Code 91106	Purpose of Disbursement Offices Supplies	
Candidate Name	Category/Type	Transaction ID : D328195 <b>[MEMO ITEM]</b>
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>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 20.00
City Mission Hills State CA Zip Code 91346	Purpose of Disbursement Telephone Expense	
Candidate Name	Category/Type	Transaction ID : D328190 <b>[MEMO ITEM]</b>
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:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 7 3 6 2 . 9 8 Transaction ID : D328191
City Mission Hills State CA Zip Code 91346	Purpose of Disbursement Telephone Expense	
Candidate Name	Category/Type	[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>B. Wireless Plus, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 3738 North Verdugo Road		Amount of Each Disbursement this Period 7 3 5 3 . 8 7 Transaction ID : D328290
City Montrose State CA Zip Code 91020	Purpose of Disbursement Cellular Services	
Candidate Name	Category/Type	[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>c. Chase Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address PO Box 94014		Amount of Each Disbursement this Period 7 3 6 2 . 9 8 Transaction ID : D328201
City Palatine State IL Zip Code 60094-4014	Purpose of Disbursement Credit Card Payment. See Memo Item.	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7 3 6 2 . 9 8
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 170.16
City Phoenix	State AZ	
Zip Code 85062-8225	Purpose of Disbursement Telephone Expense	Transaction ID : D328160 <b>[MEMO ITEM]</b>
Candidate Name	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>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 40.00
City Phoenix	State AZ	
Zip Code 85062-8225	Purpose of Disbursement Telephone Expense	Transaction ID : D328161 <b>[MEMO ITEM]</b>
Candidate Name	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>c. Burbank Bar &amp; Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 112 North San Fernando Boulevard		Amount of Each Disbursement this Period 189.20
City Burbank	State CA	
Zip Code 91502	Purpose of Disbursement Food & Beverage Expense	Transaction ID : D328238 <b>[MEMO ITEM]</b>
Candidate Name	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:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 105			
	<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)  
**Schiff for Congress**

**A. Chase Card Services**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 11 / 2013

Amount of Each Disbursement this Period: 25.00

Transaction ID : D328202

[MEMO ITEM]

**B. Chase Card Services**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 11 / 2013

Amount of Each Disbursement this Period: 52.30

Transaction ID : D328203

[MEMO ITEM]

**c. City of Burbank**

Full Name (Last, First, Middle Initial)  
Mailing Address 275 East Olive Avenue

City Burbank State CA Zip Code 91502

Purpose of Disbursement Utilities

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 11 / 2013

Amount of Each Disbursement this Period: 129.09

Transaction ID : D328244

[MEMO ITEM]

**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 96 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Constant Contact</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>11</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		11		2013
M M	/	D D	/	Y Y Y Y									
12		11		2013									
Mailing Address 1601 Trapelo Rd.		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Waltham</td> <td>MA</td> <td>02451</td> </tr> </table>		City	State	Zip Code	Waltham	MA	02451	<table border="1"> <tr> <td>15.00</td> </tr> </table>		15.00			
City	State	Zip Code											
Waltham	MA	02451											
15.00													
Purpose of Disbursement Email Expense		Transaction ID : D328210											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Five Star Seafood</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>11</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		11		2013
M M	/	D D	/	Y Y Y Y									
12		11		2013									
Mailing Address 140 W. Valley Blvd.		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Gabriel</td> <td>CA</td> <td>91755</td> </tr> </table>		City	State	Zip Code	San Gabriel	CA	91755	<table border="1"> <tr> <td>2591.06</td> </tr> </table>		2591.06			
City	State	Zip Code											
San Gabriel	CA	91755											
2591.06													
Purpose of Disbursement Fundraising Event Catering Services		Transaction ID : D328351											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. National Democratic Club</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>11</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		11		2013
M M	/	D D	/	Y Y Y Y									
12		11		2013									
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20003-4071</td> </tr> </table>		City	State	Zip Code	Washington	DC	20003-4071	<table border="1"> <tr> <td>10.00</td> </tr> </table>		10.00			
City	State	Zip Code											
Washington	DC	20003-4071											
10.00													
Purpose of Disbursement Food and Beverage Expense		Transaction ID : D328155											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Office Depot</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>11</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		11		2013
M M	/	D D	/	Y Y Y Y									
12		11		2013									
Mailing Address 1130 E. Colorado Blvd.		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Pasadena</td> <td>CA</td> <td>91106</td> </tr> </table>		City	State	Zip Code	Pasadena	CA	91106	<table border="1"> <tr> <td>165.61</td> </tr> </table>		165.61			
City	State	Zip Code											
Pasadena	CA	91106											
165.61													
Purpose of Disbursement Offices Supplies		Transaction ID : D328196											
Candidate Name		[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)		Date of Disbursement											
<b>B. Office Depot</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>11</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		11		2013
M M	/	D D	/	Y Y Y Y									
12		11		2013									
Mailing Address 1130 E. Colorado Blvd.		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Pasadena</td> <td>CA</td> <td>91106</td> </tr> </table>		City	State	Zip Code	Pasadena	CA	91106	<table border="1"> <tr> <td>17.65</td> </tr> </table>		17.65			
City	State	Zip Code											
Pasadena	CA	91106											
17.65													
Purpose of Disbursement Offices Supplies		Transaction ID : D328197											
Candidate Name		[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)		Date of Disbursement											
<b>C. USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>11</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		11		2013
M M	/	D D	/	Y Y Y Y									
12		11		2013									
Mailing Address 750 W. 7th St., Suite 33		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Los Angeles</td> <td>CA</td> <td>90081</td> </tr> </table>		City	State	Zip Code	Los Angeles	CA	90081	<table border="1"> <tr> <td>2806.00</td> </tr> </table>		2806.00			
City	State	Zip Code											
Los Angeles	CA	90081											
2806.00													
Purpose of Disbursement Postage Expense		Transaction ID : D328181											
Candidate Name		[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:													

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 105			
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 20.00
City Mission Hills	State CA	
Purpose of Disbursement Telephone Expense	Zip Code 91346	Category/ Type
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>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 672.14
City Mission Hills	State CA	
Purpose of Disbursement Telephone Expense	Zip Code 91346	Category/ Type
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>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address PO Box 9622		Amount of Each Disbursement this Period 127.57
City Mission Hills	State CA	
Purpose of Disbursement Telephone Expense	Zip Code 91346	Category/ Type
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:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 105		
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 213.40 <b>Transaction ID : D328214</b>
City Glendale	State CA	
Zip Code 91208	Purpose of Disbursement Reimb. Internet Services. See Memo Item.	Category/ Type
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>B. AOL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 75 Rockefeller Plaza		Amount of Each Disbursement this Period 213.40 <b>Transaction ID : D328298</b> <b>[MEMO ITEM]</b>
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Internet Services	Category/ Type
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>c. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D328295</b>
City Glendale	State CA	
Zip Code 91208	Purpose of Disbursement Reimb. Photography Services. See Memo Item.	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	463.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 105	
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Zachary Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 3328 Castera Avenue		Amount of Each Disbursement this Period 250.00
City Glendale	State CA	
Zip Code 91208	Purpose of Disbursement Photography Services	Transaction ID : D328299
Candidate Name	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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 3328 Castera Ave.		Amount of Each Disbursement this Period 122.75
City Glendale	State CA	
Zip Code 91208	Purpose of Disbursement Reimb. Postage. See Memo Item.	Transaction ID : D328297
Candidate Name	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>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 750 W. 7th St., Suite 33		Amount of Each Disbursement this Period 122.75
City Los Angeles	State CA	
Zip Code 90081	Purpose of Disbursement Postage Expense	Transaction ID : D328300
Candidate Name	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)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	122.75
<b>TOTAL</b> This Period (last page this line number only).....	99542.18

**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 101 OF 105	
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Crescenta Valley High School</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 2900 Community Ave.			Amount of Each Disbursement this Period -400.00 <b>Transaction ID : D332980</b>
City La Crescenta	State CA	Zip Code 91214	
Purpose of Disbursement Check Never Negotiated		Category/ Type	
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>B. Democratic Congressional Campaign Cmte.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 430 South Capitol Street, SE			Amount of Each Disbursement this Period 11923.00 <b>Transaction ID : D328227</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Federal Contribution Transfer 439 a(a)		Category/ Type	
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>C. Democratic Congressional Campaign Cmte.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 430 South Capitol Street, SE			Amount of Each Disbursement this Period 11923.00 <b>Transaction ID : D328228</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Federal Contribution Transfer 439 a(a)		Category/ Type	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23446.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 105	
	<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)  
**Schiff for Congress**

**A. Democratic Congressional Campaign Cmte.**

Full Name (Last, First, Middle Initial)

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Federal Contribution Transfer 439 a(a)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 23 / 2013

Amount of Each Disbursement this Period: 11923.00

Transaction ID : D328229

**B. Democratic Party of San Fernando Valley**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 57259

City Sherman Oaks State CA Zip Code 91314

Purpose of Disbursement Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 06 / 2013

Amount of Each Disbursement this Period: 1000.00

Transaction ID : D328225

**c. Democrats for Israel**

Full Name (Last, First, Middle Initial)

Mailing Address 17943 Magnolia Blvd.

City Encino State CA Zip Code 91316

Purpose of Disbursement Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 06 / 2013

Amount of Each Disbursement this Period: 250.00

Transaction ID : D328138

**SUBTOTAL** of Disbursements This Page (optional) ..... 13173.00

**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 103 OF 105	
	<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)  
**Schiff for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pasadena Tournament of Roses</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 13 / 2013</b>
Mailing Address <b>391 South Orange Grove Boulevard</b>		Amount of Each Disbursement this Period <b>1590.00</b> <b>Transaction ID : D328130</b>
City <b>Pasadena</b> State <b>CA</b> Zip Code <b>91184</b>	Purpose of Disbursement <b>Civic Donation</b>	
Candidate Name	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>B. Valley Grassroots for Democracy</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 06 / 2013</b>
Mailing Address <b>PO Box 573383</b>		Amount of Each Disbursement this Period <b>250.00</b> <b>Transaction ID : D328288</b>
City <b>Tarzana</b> State <b>CA</b> Zip Code <b>91357</b>	Purpose of Disbursement <b>Federal Contribution</b>	
Candidate Name	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>c. West Hollywood/Beverly Hills Dem. Club</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 23 / 2013</b>
Mailing Address <b>8149 Santa Monica Blvd., #190</b>		Amount of Each Disbursement this Period <b>750.00</b> <b>Transaction ID : D328245</b>
City <b>West Hollywood</b> State <b>CA</b> Zip Code <b>90069</b>	Purpose of Disbursement <b>Federal Contribution</b>	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2590.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 105			
	<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)  
**Schiff for Congress**

**A. Chase Card Services**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement  
Credit Card Payment. See Memo Itemization.

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 13 / 2013

Amount of Each Disbursement this Period: 500.00

Transaction ID : D328302

**B. Los Angeles County Democratic Central Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 777 S Figueroa St., Ste. 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement  
Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 13 / 2013

Amount of Each Disbursement this Period: 500.00

Transaction ID : D328270

[MEMO ITEM]

**c. Chase Card Services**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement  
Credit Card Payment. See Memo Itemization.

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 10 / 2013

Amount of Each Disbursement this Period: 500.00

Transaction ID : D329743

**SUBTOTAL** of Disbursements This Page (optional) ..... 1000.00

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