

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
LUCILLE ROYBAL-ALLARD FOR CONGRESS

ADDRESS (number and street) 6 E Street, SE
 Check if different than previously reported. (ACC) Washington DC 20003

2. **FEC IDENTIFICATION NUMBER** C00259143 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
CA 40

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 01 / 01 / 2014 through M M / D D / Y Y Y Y 03 / 31 / 2014

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 A. Christian Hart
Signature of Treasurer A. Christian Hart *[Electronically Filed]* Date M M / D D / Y Y Y Y 04 / 15 / 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.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

LUCILLE ROYBAL-ALLARD 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))....	35631.85	241068.85
(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)).....	35631.85	241068.85
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	45486.87	231034.51
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1015.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	45486.87	230018.61
8. Cash on Hand at Close of Reporting Period (from Line 27).....	40695.47	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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

LUCILLE ROYBAL-ALLARD 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).....	10456.85	69543.85
(ii) Unitemized.....	175.00	1825.00
(iii) TOTAL of contributions from individuals ▶	10631.85	71368.85
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	25000.00	169700.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	35631.85	241068.85
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	1015.90
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	35631.85	242084.75

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	45486.87	231034.51
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	16000.00	31550.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	61486.87	262584.51

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	66550.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	35631.85
25. SUBTOTAL (add Line 23 and Line 24).....	102182.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	61486.87
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	40695.47

**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 33
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Marlene Bane

Mailing Address 5816 Etiwanda Ave
Unit 1

City Tarzana State CA Zip Code 91356-2470

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

Name of Employer n/a Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 19 / 2014

Transaction ID : C9282020

Amount of Each Receipt this Period
100.00

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

Mailing Address 3150 E Pico Blvd

City Los Angeles State CA Zip Code 90023-3632

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

Name of Employer Global Management Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 05 / 2014

Transaction ID : C9278155

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mary Anne Chern

Mailing Address 6071 Montecito Dr

City Huntington Beach State CA Zip Code 92647-3220

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

Name of Employer White Memorial Medical Ctr Occupation SR VP, Fund Development & External Rel

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 19 / 2014

Transaction ID : C9282023

Amount of Each Receipt this Period
1000.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 33
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James H. Dykstra

Mailing Address 6306 Hunting Ridge Ln

City McLean	State VA	Zip Code 22101-4151
----------------	-------------	------------------------

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

Name of Employer Edington Peel Associates	Occupation Principal
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 06 / 2014

Transaction ID : C9287570

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Sally E. Furman

Mailing Address 2101 Connecticut Ave NW

City Washington	State DC	Zip Code 20008-1728
--------------------	-------------	------------------------

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

Name of Employer The Furman Group	Occupation CFO
--------------------------------------	-------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : C9302601

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Robert A. Grantham

Mailing Address 691 S Mentor Ave

City Pasadena	State CA	Zip Code 91106-4022
------------------	-------------	------------------------

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
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : C9302600

Amount of Each Receipt this Period
500.00

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

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

2750.00

**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 33
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Virgil Griffin

Mailing Address 11903 Meadow Vista Way

City Clarksville State MD Zip Code 21029-1251

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

Name of Employer Boeing Occupation Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 03 / 2014

Transaction ID : C9286677

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Jennifer Lahoda

Mailing Address 652 Mateo St # 302

City Los Angeles State CA Zip Code 90021-1325

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

Name of Employer Ellis Paint Company Occupation HR Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 07 / 2014

Transaction ID : C9278748

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Cliff Madison

Mailing Address 601 Pennsylvania Ave NW Apt 906

City Washington State DC Zip Code 20004-2647

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

Name of Employer Cliff Madison Government Relations, In Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 03 / 2014

Transaction ID : C9286678

Amount of Each Receipt this Period
 500.00

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 8 OF 33
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sidney G. Marantz

Mailing Address 15754 Regal Woods Pl

City Sherman Oaks State CA Zip Code 91403-4823

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

Name of Employer Cooperative Purchasers Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2014

Transaction ID : C9292370

Amount of Each Receipt this Period
 800.00

1100.00

B. Full Name (Last, First, Middle Initial)
Gabriel M. Monares

Mailing Address 1623 Doverfield Ave

City Hacienda Heights State CA Zip Code 91745-3228

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

Name of Employer The Monares Group LLC. Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2014

Transaction ID : C9294474

Amount of Each Receipt this Period
 1000.00

1000.00

C. Full Name (Last, First, Middle Initial)
Humberto Veloso

Mailing Address Tamayo Restaurant & Art Gallery
5300 E. Olympic Ave.

City Los Angeles State CA Zip Code 90022

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

Name of Employer Self 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 Y Y
 02 / 08 / 2014

Transaction ID : C9282158

Amount of Each Receipt this Period
 1842.00

* In-Kind: Fundraising Event Catering

1842.00

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

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

3642.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael L. Whitehead		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014	
Mailing Address 12500 Stanwood Pl		Transaction ID : C9302590	
City Los Angeles	State CA	Zip Code 90066-1524	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 464.85	
Name of Employer San Gabriel Valley Water Company	Occupation Chairman & CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 964.85		
		* In-Kind: Fundraising event catering	

Full Name (Last, First, Middle Initial) B. Michael L. Whitehead		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014	
Mailing Address 12500 Stanwood Pl		Transaction ID : C9302599	
City Los Angeles	State CA	Zip Code 90066-1524	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer San Gabriel Valley Water Company	Occupation Chairman & CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 964.85		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / 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		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	964.85
TOTAL This Period (last page this line number only).....	10456.85

**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 33
<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

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 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9302172

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF TEACHERS, AFL-CIO COMMITTEE ON POLITICAL EDUCATION

Mailing Address 555 NEW JERSEY AVENUE, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00028860

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
 03 / 27 / 2014

Transaction ID : C9297507

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 208 S. AKARD STREET SUITE 2701

City DALLAS State TX Zip Code 75202

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 10 / 2014

Transaction ID : C9278951

Amount of Each Receipt this Period
 1000.00

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 11 OF 33
<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

A. Mailing Address 101 CONSTIUTION AVENUE, NW
10TH FLOOR WEST

City State Zip Code
WASHINGTON DC 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
03 / 11 / 2014

Transaction ID : C9289262

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
CLOROX EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1221 BROADWAY

City State Zip Code
OAKLAND CA 94612

FEC ID number of contributing federal political committee. **C** C00062224

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : C9282989

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code
PHILADELPHIA PA 19103

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : C9292942

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... 7000.00

TOTAL 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 12 OF 33	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT

Mailing Address **800 17TH STREET, NW
SUITE 1100**
City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00171330**

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 Y
03 / 06 / 2014

Transaction ID : C9287571

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address **430 NORTH MICHIGAN AVENUE**
City **CHICAGO** State **IL** Zip Code **60611**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **3000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : C9302605

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CONSTRUCTION TRADES DEPARTMENT, AFL-CIO

Mailing Address **815 16TH ST., NW, SUITE 600**
City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00003160**

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 Y
03 / 06 / 2014

Transaction ID : C9287573

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... **4000.00**
TOTAL 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: PAGE 13 OF 33
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHEET METAL WORKER'S INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE PAL

Mailing Address 1750 NEW YORK AVENUE, NW

City WASHINGTON State DC Zip Code 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 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9302583

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
SHEET METAL WORKER'S INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE PAL

Mailing Address 1750 NEW YORK AVENUE, NW

City WASHINGTON State DC Zip Code 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 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9302581

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 700 13TH STREET NW, SUITE 350

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010470

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 Y
 03 / 13 / 2014

Transaction ID : C9290081

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 14 OF 33
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WEST LOS ANGELES HEALTH PAC - FEDERAL

Mailing Address 3700 WILSHIRE BLVD STE 1050B

City State Zip Code
LOS ANGELES CA 90010

FEC ID number of contributing federal political committee. **C** C00198861

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : C9302604

Amount of Each Receipt this Period
1000.00

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 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).....

1000.00

25000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DC Office of Tax and Revenue			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 941 North Capitol Street, NE, 1st			Amount of Each Disbursement this Period 54.00	
City Washington	State DC	Zip Code 20002	Transaction ID : D532944	
Purpose of Disbursement Payroll 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. DC Office of Tax and Revenue			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014	
Mailing Address 941 North Capitol Street, NE, 1st			Amount of Each Disbursement this Period 108.00	
City Washington	State DC	Zip Code 20002	Transaction ID : D532945	
Purpose of Disbursement Payroll 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) c. First Data			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014	
Mailing Address PO Box 5180			Amount of Each Disbursement this Period 30.00	
City Simi Valley	State CA	Zip Code 93062-5180	Transaction ID : D532907	
Purpose of Disbursement Credit card processing 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:				

SUBTOTAL of Disbursements This Page (optional).....	192.00
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 16 OF 33			
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. First Data		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 30.00 Transaction ID : D532908
City Simi Valley	State CA	
Zip Code 93062-5180	Purpose of Disbursement Credit card processing 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. First Data		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 1.10 Transaction ID : D532909
City Simi Valley	State CA	
Zip Code 93062-5180	Purpose of Disbursement Credit card processing 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) C. First Data		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 8.07 Transaction ID : D532910
City Simi Valley	State CA	
Zip Code 93062-5180	Purpose of Disbursement Credit card processing 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:	

SUBTOTAL of Disbursements This Page (optional).....	39.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 33			
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. First Data		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address PO Box 5180		Amount of Each Disbursement this Period 58.20
City Simi Valley	State CA	
Zip Code 93062-5180	Purpose of Disbursement Credit card processing fees	Transaction ID : D532911
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. Dotti Mavromatis		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 6 E Street, SE		Amount of Each Disbursement this Period 3710.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Salary	Transaction ID : D532938
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) C. Dotti Mavromatis		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 6 E Street, SE		Amount of Each Disbursement this Period 3710.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Salary	Transaction ID : D532939
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:		

SUBTOTAL of Disbursements This Page (optional).....	7478.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 33		
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dotti Mavromatis		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 6 E Street, SE		Amount of Each Disbursement this Period 3710.00 Transaction ID : D532940
City Washington State DC Zip Code 20003	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. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 114.38 Transaction ID : D532884
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Dues	
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) c. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 331.51 Transaction ID : D532885
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Meals/Assessments	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4155.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 1101 15th Street, NW Suite 500		Amount of Each Disbursement this Period 1950.00 Transaction ID : D532913
City Washington State DC Zip Code 20005	Purpose of Disbursement Software fee	
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. Pride at Work		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 815 16th Street, NW		Amount of Each Disbursement this Period 250.00 Transaction ID : D532932
City Washington State DC Zip Code 20006	Purpose of Disbursement Advertisement	
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) c. QuickBooks Payroll Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 2800 E. Commerce Center Pl.		Amount of Each Disbursement this Period 46.79 Transaction ID : D532893
City Tucson State AZ Zip Code 85706	Purpose of Disbursement Payroll service fee	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2246.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 33		
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. QuickBooks Payroll Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 2800 E. Commerce Center Pl.		Amount of Each Disbursement this Period 107.88 Transaction ID : D532894
City Tucson	State AZ Zip Code 85706	
Purpose of Disbursement Payroll service 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. QuickBooks Payroll Service		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 2800 E. Commerce Center Pl.		Amount of Each Disbursement this Period 107.88 Transaction ID : D532895
City Tucson	State AZ Zip Code 85706	
Purpose of Disbursement Payroll service 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) C. QuickBooks Payroll Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 2800 E. Commerce Center Pl.		Amount of Each Disbursement this Period 97.30 Transaction ID : D532896
City Tucson	State AZ Zip Code 85706	
Purpose of Disbursement Payroll service 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:		

SUBTOTAL of Disbursements This Page (optional).....	313.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Registrar-Recorder/County Clerk		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 12400 Imperial Hwy		Amount of Each Disbursement this Period 9200.00 Transaction ID : D532933
City Norwalk	State CA Zip Code 90650-3134	
Purpose of Disbursement Candidate statement		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. Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 1500 - 11th Street		Amount of Each Disbursement this Period 1635.60 Transaction ID : D532901
City Sacramento	State CA Zip Code 95814	
Purpose of Disbursement Filing 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) c. Twenty-First Century Group		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 434 New Jersey Avenue, SE		Amount of Each Disbursement this Period 350.00 Transaction ID : D532897
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraising/Room 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:		

SUBTOTAL of Disbursements This Page (optional).....	11185.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 2480.00 Transaction ID : D532941
City Cincinnati	State OH Zip Code 45999-0005	
Purpose of Disbursement Payroll 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. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 2450.00 Transaction ID : D532942
City Cincinnati	State OH Zip Code 45999-0005	
Purpose of Disbursement Payroll 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) c. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 2444.00 Transaction ID : D532943
City Cincinnati	State OH Zip Code 45999-0005	
Purpose of Disbursement Payroll 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:		

SUBTOTAL of Disbursements This Page (optional).....	7374.00
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 23 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Humberto Veloso		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2014
Mailing Address Tamayo Restaurant & Art Gallery 5300 E. Olympic Ave.		Amount of Each Disbursement this Period 1842.00 Transaction ID : D529819
City Los Angeles	State CA Zip Code 90022	
Purpose of Disbursement Fundraising Event Catering	Category/Type	* In-Kind Received
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address PO Box 4001		Amount of Each Disbursement this Period 157.96 Transaction ID : D532886
City Inglewood	State CA Zip Code 90313	
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:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address PO Box 4001		Amount of Each Disbursement this Period 361.19 Transaction ID : D532887
City Inglewood	State CA Zip Code 90313	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2361.19
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 24 OF 33			
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address PO Box 4001		Amount of Each Disbursement this Period 786.21 Transaction ID : D532888
City Inglewood	State CA	
Zip Code 90313	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:	

Full Name (Last, First, Middle Initial) B. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address PO Box 1115		Amount of Each Disbursement this Period 305.00 Transaction ID : D532946
City Richmond	State VA	
Zip Code 23218	Purpose of Disbursement Payroll 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) c. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address PO Box 1115		Amount of Each Disbursement this Period 305.00 Transaction ID : D532947
City Richmond	State VA	
Zip Code 23218	Purpose of Disbursement Payroll 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:	

SUBTOTAL of Disbursements This Page (optional).....	786.21
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 25 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 1115		Amount of Each Disbursement this Period 305.00 Transaction ID : D532948
City Richmond	State VA Zip Code 23218	
Purpose of Disbursement Payroll 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. Mr. Michael L. Whitehead		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 12500 Stanwood Pl		Amount of Each Disbursement this Period 464.85 Transaction ID : D532872
City Los Angeles	State CA Zip Code 90066-1524	
Purpose of Disbursement Fundraising event catering	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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) c. Winpisinger & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 1509.65 Transaction ID : D532902
City Gaithersburg	State MD Zip Code 20878	
Purpose of Disbursement Administrative services/Compliance	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:		

SUBTOTAL of Disbursements This Page (optional).....	2279.50
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 26 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Winpisinger & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 1507.84 Transaction ID : D532903
City Gaithersburg State MD Zip Code 20878	Purpose of Disbursement Administrative services/Compliance	
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. Winpisinger & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 1502.45 Transaction ID : D532904
City Gaithersburg State MD Zip Code 20878	Purpose of Disbursement Administrative services/Compliance	
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) c. Chase Card Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 163.60 Transaction ID : D532898
City Wilmington State DE Zip Code 19886-5153	Purpose of Disbursement Annual fee	
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:		

SUBTOTAL of Disbursements This Page (optional).....	3173.89
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 27 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Steven's Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 5332 Stevens Pl		Amount of Each Disbursement this Period 41.50
City Commerce	State CA	
Zip Code 90040-3993	Purpose of Disbursement Meal	Transaction ID : D532905
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. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address Longworth Building		Amount of Each Disbursement this Period 5.60
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Postage	Transaction ID : D532921
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) c. Chase Card Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 3463.71
City Wilmington	State DE	
Zip Code 19886-5153	Purpose of Disbursement Credit card (see below)	Transaction ID : D532899
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:		

SUBTOTAL of Disbursements This Page (optional).....	3463.71
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 28 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address P.O. Box 619612 MD 2400 CPII		Amount of Each Disbursement this Period 272.00
City DFW Airport	State TX Zip Code 76021	
Purpose of Disbursement Travel/Airfare	Candidate Name	Transaction ID : D532890
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Hyatt Hotel Cambridge		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 100 Heron Blvd		Amount of Each Disbursement this Period 1400.00
City Cambridge	State MD Zip Code 21613	
Purpose of Disbursement Travel/Lodging (Democratic Retreat)	Candidate Name	Transaction ID : D532906
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 3301 Jefferson Davis Hwy		Amount of Each Disbursement this Period 178.88
City Alexandria	State VA Zip Code 22305	
Purpose of Disbursement Office supplies	Candidate Name	Transaction ID : D532923
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[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 29 OF 33		
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tamayo		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 5300 E. Olympic Ave.		Amount of Each Disbursement this Period 331.00
City Los Angeles	State CA	
Zip Code 90022	Purpose of Disbursement Meal	Transaction ID : D532934
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. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address Longworth Building		Amount of Each Disbursement this Period 98.00
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Postage	Transaction ID : D532922
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) c. Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 414.95
City Wilmington	State DE	
Zip Code 19886-5153	Purpose of Disbursement Credit card (see below if itemized)	Transaction ID : D532924
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:		

SUBTOTAL of Disbursements This Page (optional).....	414.95
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 30 OF 33			
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 25.00
City Wilmington	State DE	
Zip Code 19886-5153	Purpose of Disbursement Annual fee	Transaction ID : D532925 [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:		

Full Name (Last, First, Middle Initial) B. Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 125.00
City Wilmington	State DE	
Zip Code 19886-5153	Purpose of Disbursement Annual fee	Transaction ID : D532926 [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:		

Full Name (Last, First, Middle Initial) C. Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 25.00
City Wilmington	State DE	
Zip Code 19886-5153	Purpose of Disbursement Annual fee	Transaction ID : D532927 [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:		

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 31 OF 33			
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ruby's Diner			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014		
Mailing Address 201 World Way			Amount of Each Disbursement this Period 15.95		
City Los Angeles	State CA	Zip Code 90045-5807	Transaction ID : D532919 [MEMO ITEM]		
Purpose of Disbursement Meal		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. US Postmaster			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014		
Mailing Address Longworth Building			Amount of Each Disbursement this Period 224.00		
City Washington	State DC	Zip Code 20515	Transaction ID : D532920 [MEMO ITEM]		
Purpose of Disbursement Postage		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) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code			
Purpose of Disbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	45464.12

**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 32 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 430 South Capitol St., SE		Amount of Each Disbursement this Period 15000.00 Transaction ID : D532928
City Washington State DC Zip Code 20003	Purpose of Disbursement Unlimited transfer to national party	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ELOISE GOMEZ REYES FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address PO BOX 11487		Amount of Each Disbursement this Period 1000.00 Transaction ID : D532929
City SAN BERNARDINO State CA Zip Code 92423	Purpose of Disbursement Contribution	
Candidate Name ELOISE GOMEZ REYES	Category/Type	
Office Sought: <input checked="" 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: CA District: 31		

Full Name (Last, First, Middle Initial) c. California Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 1401 - 21st Street, Suite 100		Amount of Each Disbursement this Period 350.00 Transaction ID : D532891 [MEMO ITEM]
City Sacramento State CA Zip Code 95814-5221	Purpose of Disbursement Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16000.00
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 33 OF 33	
	<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)
LUCILLE ROYBAL-ALLARD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. California Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 1401 - 21st Street, Suite 100		Amount of Each Disbursement this Period 703.40
City Sacramento State CA Zip Code 95814-5221	Purpose of Disbursement Contribution	
Candidate Name		Transaction ID : D532892
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

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

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

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	16000.00