

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

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

FOR LINE NUMBER: PAGE 8 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Herbalife International Inc. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Cacciatore, Jean Marie, , ,**

Mailing Address 800 W Olympic Blvd Ste 406

City  
Los Angeles

State  
CA

Zip Code  
90015-1367

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Herbalife International Inc.

Occupation (for Individual)  
Chief Human Resources Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2019

**Transaction ID : A2019-528192**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Chiu, Shin-Shing, , ,**

Mailing Address 990 W 190th St Ste 650

City  
Torrance

State  
CA

Zip Code  
90502-1075

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Herbalife International Inc.

Occupation (for Individual)  
Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2019

**Transaction ID : A2019-528118**

Amount of Each Receipt this Period

115.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Chiu, Shin-Shing, , ,**

Mailing Address 990 W 190th St Ste 650

City  
Torrance

State  
CA

Zip Code  
90502-1075

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Herbalife International Inc.

Occupation (for Individual)  
Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 22 / 2019

**Transaction ID : A2019-528203**

Amount of Each Receipt this Period

115.38

☐ Memo Item

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

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

305.76