

# 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 ▲

STATE ▼ DISTRICT

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

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 MM / DD / YYYY in the State of

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

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

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY  
07 / 01 / 2015

through

MM / DD / YYYY  
09 / 30 / 2015

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

MM / DD / YYYY  
10 / 15 / 2015

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

Office Use Only									
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**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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))....	122639.75	322367.08
(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)).....	122639.75	322367.08
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	62859.78	270025.72
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1388.01
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	62859.78	268637.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2081147.27	
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: M M / D D / Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y 09 / 30 / 2015

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).....	42893.96	176543.96
(ii) Unitemized .....	145.79	4453.12
(iii) TOTAL of contributions from individuals .....	43039.75	180997.08
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	79600.00	141370.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	122639.75	322367.08
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	1388.01
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	-7763.14	-8167.99
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	114876.61	315587.10

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	62859.78	270025.72
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 .....	39965.00	120935.95
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	102824.78	390961.67

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2069095.44
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	114876.61
25. SUBTOTAL (add Line 23 and Line 24).....	2183972.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	102824.78
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2081147.27

**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 84
	<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)  
**Hranoosh Agajanian**

Mailing Address 1056 Trafalger Dr.

City Glendale State CA Zip Code 91207

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888380**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 843 Cumberland Rd.

City Glendale State CA Zip Code 91202

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

Name of Employer ME Holding, LLC Occupation Commercial Real Estate/Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888398**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 45492 Bison Ct.

City Temecula State CA Zip Code 92592

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

Name of Employer Law Offices of Edmund Anciano Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 15 / 2015

**Transaction ID : C6888821**

Amount of Each Receipt this Period  
 2700.00

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

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

3700.00

**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 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 45492 Bison Ct.

City Temecula	State CA	Zip Code 92592
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FEC ID number of contributing federal political committee. **C**

Name of Employer Law Offices of Edmund Anciano	Occupation Attorney
---	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2015

**Transaction ID : C6888822**

Amount of Each Receipt this Period  
2300.00

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

Mailing Address 1600 Santa Barbara Ave.

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

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

Name of Employer Prudential California Realty	Occupation Real Estate Agent
--	---------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888431**

Amount of Each Receipt this Period  
500.00

**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888369**

Amount of Each Receipt this Period  
500.00

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

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

3300.00

**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 84
	<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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888432**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 814 E. Broadway

City Glendale State CA Zip Code 91205

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

Name of Employer Self-Employed Occupation Family Practice Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888433**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 2511 Weston Place

City Glendale State CA Zip Code 91208

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

Name of Employer Delta Drugs Occupation President-Pharmacy

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888442**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00

**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 84
	<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)  
**Levon Ayvazian**

Mailing Address 3824 Skycrest Dr.

City Pasadena State CA Zip Code 91107

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

Name of Employer Self-Employed Occupation Real Estate Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888392**

Amount of Each Receipt this Period  
 500.00

**B.** 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888370**

Amount of Each Receipt this Period  
 500.00

**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888378**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00



**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 84
	<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)  
**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 Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888377**

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 15760 Ventura Blvd., Ste.1550

City Encino State CA Zip Code 91436

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

Name of Employer Elite Financial Partners Occupation Founder and President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888382**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 17407 Napa Street

City Northridge State CA Zip Code 91325

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

Name of Employer Charukian Family Trust Occupation Trustee

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888436**

Amount of Each Receipt this Period  
 250.00

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

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

1150.00

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

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

FOR LINE NUMBER: PAGE 10 OF 84  
(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)  
**Richard Coleman**

Mailing Address 6803 Hampshire Rd.

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
Space Transportation Association President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 15 2015

**Transaction ID : C6887840**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 1350 Ontario Ave.

City State Zip Code  
Pasadena CA 91103

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

Name of Employer Occupation  
Intertex, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 23 2015

**Transaction ID : C6888371**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 534 S Berkeley Ave.

City State Zip Code  
San Marino CA 91108

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

Name of Employer Occupation  
San Marino Council Planning Commission

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 23 2015

**Transaction ID : C6888385**

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: (check only one)	PAGE 11 OF 84
	<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)  
**Dorothy Ellis**

Mailing Address 7941 Zeus Dr.

City Los Angeles State CA Zip Code 90046-1649

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

Name of Employer Dellis & Associates Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888434**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 7941 Zeus Dr.

City Los Angeles State CA Zip Code 90046-1649

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

Name of Employer Dellis & Associates Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888435**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1085 Inverness Drive

City La Canada Flintridge State CA Zip Code 91011

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

Name of Employer Galoostian Family Trust Occupation Trustee

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888372**

Amount of Each Receipt this Period  
250.00

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

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

1500.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 12 OF 84

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

**A.** Full Name (Last, First, Middle Initial)  
**Alice Garakian**

Mailing Address 225 S. Highland Ave.

City Los Angeles State CA Zip Code 90036

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888393**

Amount of Each Receipt this Period  
 250.00

**B.** 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888443**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 5315 Haskell Street

City La Canada Flintridge State CA Zip Code 91011

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 15 / 2015

**Transaction ID : C6887844**

Amount of Each Receipt this Period  
 1000.00

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

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

1500.00

**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 84  
(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)  
**Michael Herson**

Mailing Address 8709 Burning Tree Rd

City State Zip Code  
Bethesda MD 20817-3054

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

Name of Employer Occupation  
American Defense International Government Affairs Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : C6881975**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 8709 Burning Tree Rd

City State Zip Code  
Bethesda MD 20817-3054

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

Name of Employer Occupation  
American Defense International Government Affairs Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : C6881979**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 809 N. Quaker Ln.

City State Zip Code  
Alexandria VA 22302

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888354**

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 14 OF 84
	<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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2015

**Transaction ID : C6888373**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 16133 Ventura Blvd., Ste. 910

City State Zip Code  
Encino CA 91436

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

Name of Employer Occupation  
Law offices of Nora Hovsepien Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2015

**Transaction ID : C6888848**

Amount of Each Receipt this Period  
750.00

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

Mailing Address P.O. Box 2623

City State Zip Code  
Toluca Lake CA 91610

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

Name of Employer Occupation  
Keller Williams Real Estate Broker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 23 / 2015

**Transaction ID : C6888396**

Amount of Each Receipt this Period  
500.00

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

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

1550.00

**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 84
	<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)  
**Mark Kadesh**

Mailing Address 147 Tennessee Ave. NE

City Washington State DC Zip Code 20002-6425

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

Name of Employer Kadesh & Associates LLC Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
236.01

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : C7030547**

Amount of Each Receipt this Period  
236.01

\* In-Kind: Fundraising - Food & Beverages

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

Mailing Address 1700 Valley View Rd.

City Glendale State CA Zip Code 91202

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

Name of Employer Palladio Restaurant Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888388**

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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888379**

Amount of Each Receipt this Period  
1000.00

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

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

1486.01

**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 84
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. Hilda Kasimian</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 27 / 2015	
Mailing Address 1780 Cielito Dr.		<b>Transaction ID : C6888400</b>	
City Glendale	State CA	Zip Code 91207	Amount of Each Receipt this Period _____ 2028.97 * In-Kind: Food & Beverages
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Cedars-Sinai Medical Center	Occupation Pharmacist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2028.97		

Full Name (Last, First, Middle Initial) <b>B. Stepan Kasimian</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 27 / 2015	
Mailing Address 1780 Cielito Dr.		<b>Transaction ID : C6888401</b>	
City Glendale	State CA	Zip Code 91207	Amount of Each Receipt this Period _____ 2028.98 * In-Kind: Food & Beverages
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Cedars-Sinai Medical Center	Occupation Spinal Surgeon		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2028.98		

Full Name (Last, First, Middle Initial) <b>C. Elvin Kasimoglu-Tran</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 27 / 2015	
Mailing Address 7 Coachman		<b>Transaction ID : C6888846</b>	
City Trabuco Canyon	State CA	Zip Code 92679	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer ABC Designs Now	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 4307.95
<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: PAGE 17 OF 84  
(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)  
**Harout Keosian**

Mailing Address 5258 Newcastle Ave., Apt.32

City Encino State CA Zip Code 91316

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

Name of Employer Keosian Berberian LLP Occupation Founder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888437**

Amount of Each Receipt this Period  
 500.00

**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888394**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1044 Trafalger Drive

City Glendale State CA Zip Code 91207

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

Name of Employer Self-Employed Occupation Oral and Maxillofacial Surgeon

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888427**

Amount of Each Receipt this Period  
 250.00

**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 18 OF 84
	<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)  
**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888428**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1359 J Lee Cir.

City Glendale State CA Zip Code 91208

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

Name of Employer Self-Employed Occupation Real Estate Agent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888391**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 3711 Winford Dr.

City Tarzana State CA Zip Code 91356

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

Name of Employer Exoto, Inc. Occupation Owner/President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888438**

Amount of Each Receipt this Period  
 500.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 19 OF 84  
(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)  
**Narine Kezian**

Mailing Address 2245 Hill Dr.

City Los Angeles State CA Zip Code 90041

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

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888374**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 7009 Arbor Ln

City McLean State VA Zip Code 22101-1545

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

Name of Employer Thomas Capitol Partners, Inc. Occupation President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6887337**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1209 Phillips Rd.

City Glendale State CA Zip Code 91207

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

Name of Employer Paramount Real Estate Occupation Agent

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888375**

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 20 OF 84
	<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)  
**Michael L Ledford**

Mailing Address 3709 25th Street N

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Lewis Burke Associates VP-Client Management

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2015

**Transaction ID : C6887841**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 7705 Hampton Ave

City State Zip Code  
West Hollywood CA 90046-4757

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

Name of Employer Occupation  
Airmedia Software Developer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 17 / 2015

**Transaction ID : C6866080**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4274 Beulah Dr.

City State Zip Code  
La Canada Flintridge CA 91011

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

Name of Employer Occupation  
M & M Media Inventor/Businessman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888395**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

**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 84
	<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 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 28 / 2015

**Transaction ID : C6888734**

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 17325 Signature Drive

City Granada Hills State CA Zip Code 91344

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

Name of Employer: Self-Employed Occupation: Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 09 / 23 / 2015

**Transaction ID : C6888381**

Amount of Each Receipt this Period: 500.00

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

Mailing Address 17325 Signature Drive

City Granada Hills State CA Zip Code 91344

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

Name of Employer: Self-Employed Occupation: Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 09 / 27 / 2015

**Transaction ID : C6888439**

Amount of Each Receipt this Period: 1000.00

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

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

2500.00

**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 84
	<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)  
**Morongo Band of Mission Indians**

Mailing Address 11581 Potrero Rd.

City Banning State CA Zip Code 92220

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : C6888868**

Amount of Each Receipt this Period  
 1000.00

Sovereign Nation

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

Mailing Address 27 Ridgeline Dr.

City Newport Beach State CA Zip Code 92660

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888389**

Amount of Each Receipt this Period  
 1250.00

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

Mailing Address 350 N. Glenoaks Blvd., Ste. 200

City Burbank State CA Zip Code 91502

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

Name of Employer Occupation  
Industrial Motor Power Corp Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888390**

Amount of Each Receipt this Period  
 1000.00

**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: PAGE 23 OF 84  
(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)  
**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: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888376**

Amount of Each Receipt this Period  
 750.00

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

Mailing Address 1239 Elm Ave.

City Glendale State CA Zip Code 91201

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888399**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1425 Glencrest Ter.

City Glendale State CA Zip Code 91208

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888441**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 24 OF 84  
(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)  
**Never Samuelian**

Mailing Address 16146 Aurora Crest Drive

City Whittier State CA Zip Code 90605

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

Name of Employer Nationwide Env. Serv. Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888440**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1625 Glorietta Ave.

City Glendale State CA Zip Code 91208

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

Name of Employer ACSES Group Occupation Interior Design

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888387**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 8979 Norma Pl

City West Hollywood State CA Zip Code 90069-4818

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

Name of Employer Connectivity, Inc. Occupation CFO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : C6866382**

Amount of Each Receipt this Period  
 250.00

**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 25 OF 84
	<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)  
**Lara Tchakmakjian**

Mailing Address 1844 Colina Dr.

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

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

Name of Employer REMAX-Elite	Occupation Realtor
---------------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : C6888384**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1024 Via Romales

City San Dimas	State CA	Zip Code 91773
-------------------	-------------	-------------------

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

Name of Employer Self-Employed	Occupation Physician-Family Practice/Geriatrics
-----------------------------------	--

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888368**

Amount of Each Receipt this Period  
1000.00

**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888367**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 84
	<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)  
**Silvana Vartanian**

Mailing Address 1975 Rimcrest Dr.

City Glendale	State CA	Zip Code 91207-1043
------------------	-------------	------------------------

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

Name of Employer Onik's Shoes	Occupation Owner
----------------------------------	---------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888397**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4261 Beulah Dr.

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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888366**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1545 Royal Blvd.

City Glendale	State CA	Zip Code 91207
------------------	-------------	-------------------

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

Name of Employer Sylva & Cie	Occupation Co. Owner
---------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888383**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

42893.96

**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 84
	<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)  
**AFSCME, AFL-CIO PEOPLE PAC**

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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : C6888342**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 220 Leigh Farm Rd.

City Durham State NC Zip Code 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : C6887833**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 777 6th Street 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2015

**Transaction ID : C6888828**

Amount of Each Receipt this Period  
 2500.00

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

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

5500.00

**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 28 OF 84
	<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 Physical Therapy PAC**

Mailing Address 1111 N. Fairfax St.

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : C6887824**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**APWU COPA - American Postal Workers Union PAC**

Mailing Address 1300 L Street, N.W.

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6888364**

Amount of Each Receipt this Period  
 1500.00

**C.** 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : C6887830**

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 29 OF 84
	<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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6888349**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**BAE Systems USA PAC**

Mailing Address 1101 Wilson Boulevard

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : C6887835**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**BAE Systems USA PAC**

Mailing Address 1101 Wilson Boulevard

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : C6888353**

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 30 OF 84
	<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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : C6880714**

Amount of Each Receipt this Period  
2500.00

**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : C6887838**

Amount of Each Receipt this Period  
1000.00

**C. Carpenters' Legislative Improvement Committee**

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

Mailing Address 101 Constitution Avenue, NW, 10th

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6887820**

Amount of Each Receipt this Period  
2500.00

**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 31 OF 84
	<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)  
**Comcast Corporation & NBC Universal PAC**

Mailing Address 1701 JFK Blvd.

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : C6888355**

Amount of Each Receipt this Period  
2000.00

**B.** 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : C6887829**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Communications Workers of America CWA-COPE PCC**

Mailing Address 501 3rd Street, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6888360**

Amount of Each Receipt this Period  
5000.00

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

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

9500.00

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

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

FOR LINE NUMBER: PAGE 32 OF 84  
(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)  
**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : C6885347**

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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2015**

**Transaction ID : C6887821**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**DynCorp International LLC PAC**

Mailing Address 1700 Old Meadow Road

City Mc Lean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C C00409979**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 07 / 2015**

**Transaction ID : C6880710**

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 33 OF 84
	<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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6888351**

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 Drive

City State Zip Code  
Falls Church VA 22042

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6888350**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ernst & Young PAC**

Mailing Address 1101 New York Ave. NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2015

**Transaction ID : C6887842**

Amount of Each Receipt this Period  
2500.00

**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 34 OF 84
	<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)  
**Foley & Lardner Political Fund, Inc.**

Mailing Address 3000 K Street NW, 6th Fl.

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00105338

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : C6888365**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**General Electric Company PAC**

Mailing Address 1299 Pennsylvania Ave. NW, Ste. 11

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 24 / 2015

**Transaction ID : C6880711**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 600 Maryland Avenue SW, Ste. 850E

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 10 / 2015

**Transaction ID : C6887822**

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: PAGE 35 OF 84  
(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)  
**International Alliance Theatrical Stage Employees**

Mailing Address 207 West 25th Street, 4th Floor

City State Zip Code  
New York NY 10001

FEC ID number of contributing federal political committee. **C C00528455**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2015

**Transaction ID : C6887828**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**International Brotherhood of Electrical Workers PAC**

Mailing Address 900 Seventh St. NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C C00027342**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : C6888348**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 2121 Crystal Drive, 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: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 18 / 2015

**Transaction ID : C6880712**

Amount of Each Receipt this Period  
1000.00

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

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

8500.00

**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 84
	<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)  
**Lockheed Martin Employees PAC**

Mailing Address 2121 Crystal Drive, 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : C6887825**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Motion Picture Association PAC**

Mailing Address 1600 I St. NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00139519

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : C6888357**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**National Association of Federal Credit Unions PAC**

Mailing Address 3138 10th St. N.

City State Zip Code  
Arlington VA 22201-2149

FEC ID number of contributing federal political committee. **C** C00040659

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2015

**Transaction ID : C6887843**

Amount of Each Receipt this Period  
1000.00

**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: PAGE 37 OF 84  
(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. National Association of Insurance and Financial Advisors PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2901 Telestar Court  
 City Falls Church State VA Zip Code 22042  
 FEC ID number of contributing federal political committee. **C C00005249**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : C6888352**  
 Amount of Each Receipt this Period  
 1000.00

**B. National Beer Wholesalers Assn. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 King St., Ste. 600  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C C00144766**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015  
**Transaction ID : C6888359**  
 Amount of Each Receipt this Period  
 2500.00

**C. National Cable & Telecomm. Assoc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 Massachusetts Avenue NW, Ste. 1  
 City Washington State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C C00010082**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015  
**Transaction ID : C6887834**  
 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 38 OF 84
	<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. National Thoroughbred Racing Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 2525 Harrodsburg Road

City Lexington State KY Zip Code 40504

FEC ID number of contributing federal political committee. **C C00360008**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6888363**

Amount of Each Receipt this Period  
1500.00

**B. New Democrat Coalition PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 700 13th Street NW, Ste. 600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00409730**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6888823**

Amount of Each Receipt this Period  
2500.00

**C. Orbital Sciences Corp. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 21839 Atlantic Blvd.

City Dulles State VA Zip Code 20166

FEC ID number of contributing federal political committee. **C C00195263**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2015

**Transaction ID : C6888827**

Amount of Each Receipt this Period  
1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 84
	<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)  
**Pacific Life Insurance Co. PAC**

Mailing Address 700 Newport Center Drive

City State Zip Code  
Newport Beach CA 92660

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2015

**Transaction ID : C6887836**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1301 K Street NW, Ste. 800 West

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2015

**Transaction ID : C6887837**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1100 Wilson Boulevard, Ste. 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 12 / 2015

**Transaction ID : C6880713**

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 40 OF 84
	<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)**  
**Raytheon PAC**

Mailing Address 1100 Wilson Boulevard, Ste. 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : C6887823**

Amount of Each Receipt this Period  
1000.00

**B. Full Name (Last, First, Middle Initial)**  
**Sempra Energy Employees PAC**

Mailing Address 101 Ash St., HQ 15B

City State Zip Code  
San Diego CA 92101

FEC ID number of contributing federal political committee. **C C00008748**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2015

**Transaction ID : C6887831**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address P.O. Box 50193

City State Zip Code  
Sparks NV 89435

FEC ID number of contributing federal political committee. **C C00367995**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2015

**Transaction ID : C6887832**

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 84
	<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)  
**Sony Pictures Entertainment, Inc. PAC**

Mailing Address 10202 W. Washington Blvd. #1111

City Culver City	State CA	Zip Code 90232
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00282038

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2015

**Transaction ID : C6888824**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Space Exploration Technologies Corp PAC**

Mailing Address 1310 E. Grand Ave.

City El Segundo	State CA	Zip Code 90245
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00411116

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : C6887839**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**The Walt Disney Company Employees PAC**

Mailing Address 425 3rd Street, SW Ste. 1100

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

FEC ID number of contributing federal political committee. **C** C00197749

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : C6888358**

Amount of Each Receipt this Period  
2000.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 42 OF 84  
(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)  
**Time Warner PAC**

Mailing Address 800 Connecticut Avenue NW, Ste. 12

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00339291

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : C6888356**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**UAW Voluntary Community Action Program PAC**

Mailing Address 8000 East Jefferson Avenue

City Detroit State MI Zip Code 48214-3963

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2015

**Transaction ID : C6888825**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Viacom International, Inc. PAC**

Mailing Address 1501 M Street, NW Ste. 1100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00167759

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6888361**

Amount of Each Receipt this Period  
500.00

**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: PAGE 43 OF 84  
(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)  
**Viacom International, Inc. PAC**

Mailing Address 1501 M Street, NW Ste. 1100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00167759

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6888362**

Amount of Each Receipt this Period  
 1500.00

**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).....

1500.00

79600.00

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

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

FOR LINE NUMBER: PAGE 44 OF 84  
(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)  
**California Bank & Trust**

Mailing Address 550 S. Hope Street, Suite 100

City State Zip Code  
Los Angeles CA 90071

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**601.24**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 31 2015**

**Transaction ID : C6888842**

Amount of Each Receipt this Period  
**55.50**

Interest

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

Mailing Address 550 S. Hope Street, Suite 100

City State Zip Code  
Los Angeles CA 90071

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**601.24**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 31 2015**

**Transaction ID : C6888843**

Amount of Each Receipt this Period  
**55.50**

Interest

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

Mailing Address 550 S. Hope Street, Suite 100

City State Zip Code  
Los Angeles CA 90071

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**601.24**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 30 2015**

**Transaction ID : C6888844**

Amount of Each Receipt this Period  
**53.72**

Interest

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

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

**164.72**

**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 84
	<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>City National Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015
Mailing Address 525 South Flower Street		<b>Transaction ID : C6888840</b>
City Los Angeles	State CA	Zip Code 90071
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 21.32	
Name of Employer	Occupation	Interest
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 227.62	

Full Name (Last, First, Middle Initial) <b>City National Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2015
Mailing Address 525 South Flower Street		<b>Transaction ID : C6888841</b>
City Los Angeles	State CA	Zip Code 90071
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 21.31	
Name of Employer	Occupation	Interest
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 227.62	

Full Name (Last, First, Middle Initial) <b>City National Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address 525 South Flower Street		<b>Transaction ID : C6888867</b>
City Los Angeles	State CA	Zip Code 90071
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.64	
Name of Employer	Occupation	Interest
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 227.62	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	63.27
<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 46 OF 84
	<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)  
**Proamerica Bank**

Mailing Address 888 S Figueroa Street, # 100

City Los Angeles	State CA	Zip Code 90017
---------------------	-------------	-------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 462.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : C6888837**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 42.90

Interest

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

Mailing Address 888 S Figueroa Street, # 100

City Los Angeles	State CA	Zip Code 90017
---------------------	-------------	-------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 462.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : C6888838**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 42.91

Interest

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

Mailing Address 888 S Figueroa Street, # 100

City Los Angeles	State CA	Zip Code 90017
---------------------	-------------	-------------------

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 462.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6888839**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 41.53

Interest

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

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

\_\_\_\_\_ 127.34

\_\_\_\_\_

**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 84  
(check only one)  
 11a  11b  11c  11d  15  
 12  13a  13b  14

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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 Boulevard, Suit

City State Zip Code  
Los Angeles CA 90064

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
-11425.11

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 31 2015

**Transaction ID : C6888835**

Amount of Each Receipt this Period  
152.10

Change in Investment Value

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

Mailing Address 11835 West Olympic Boulevard, Suit

City State Zip Code  
Los Angeles CA 90064

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
-11425.11

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 31 2015

**Transaction ID : C6888836**

Amount of Each Receipt this Period  
-5504.71

Change in Investment Value

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

Mailing Address 11835 West Olympic Boulevard, Suit

City State Zip Code  
Los Angeles CA 90064

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
-11425.11

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 31 2015

**Transaction ID : C6888845**

Amount of Each Receipt this Period  
633.48

Change in Investment Value

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

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

-4719.13

**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 84
	<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 Boulevard, Suit

City Los Angeles State CA Zip Code 90064

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
-11425.11

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6889033**

Amount of Each Receipt this Period  
-3526.40

Change in Investment Value

**B.** 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
460.96

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2015

**Transaction ID : C6888833**

Amount of Each Receipt this Period  
42.81

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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
460.96

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : C6888834**

Amount of Each Receipt this Period  
42.81

Interest

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

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

-3440.78



**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 49 OF 84
	<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)  
**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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
460.96

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : C6889031**

Amount of Each Receipt this Period  
41.44

Interest

**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).....

41.44

-7763.14

**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 50 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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**

Full Name (Last, First, Middle Initial) <b>A. Anthem Blue Cross</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address P.O. Box 54010		Amount of Each Disbursement this Period 1583.00 <b>Transaction ID : D361356</b>
City Los Angeles	State CA	
Zip Code 90054-0010	Purpose of Disbursement Health Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <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 08 / 26 / 2015
Mailing Address P.O. Box 54010		Amount of Each Disbursement this Period 1583.00 <b>Transaction ID : D361375</b>
City Los Angeles	State CA	
Zip Code 90054-0010	Purpose of Disbursement Health Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <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 09 / 24 / 2015
Mailing Address P.O. Box 54010		Amount of Each Disbursement this Period 1583.00 <b>Transaction ID : D361399</b>
City Los Angeles	State CA	
Zip Code 90054-0010	Purpose of Disbursement Health Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4749.00
<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 51 OF 84			
	<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
Mailing Address 800 Capitol Mall - MIC 83		M M / D D / Y Y Y Y 08 / 14 / 2015
City Sacramento	State CA	Zip Code 95814
Purpose of Disbursement Payroll Taxes	Amount of Each Disbursement this Period 93.86	
Candidate Name	Transaction ID : D361373	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EDD</b>		Date of Disbursement
Mailing Address 800 Capitol Mall - MIC 83		M M / D D / Y Y Y Y 08 / 31 / 2015
City Sacramento	State CA	Zip Code 95814
Purpose of Disbursement Payroll Taxes	Amount of Each Disbursement this Period 41.88	
Candidate Name	Transaction ID : D361383	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EDD</b>		Date of Disbursement
Mailing Address 800 Capitol Mall - MIC 83		M M / D D / Y Y Y Y 09 / 15 / 2015
City Sacramento	State CA	Zip Code 95814
Purpose of Disbursement Payroll Taxes	Amount of Each Disbursement this Period 42.43	
Candidate Name	Transaction ID : D361384	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	178.17
<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 52 OF 84			
	<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 09 / 30 / 2015
Mailing Address 800 Capitol Mall - MIC 83		Amount of Each Disbursement this Period 42.43
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Payroll Taxes	
Candidate Name		Transaction ID : D361385
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. EDD</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address 800 Capitol Mall - MIC 83		Amount of Each Disbursement this Period 40.03
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Payroll Taxes	
Candidate Name		Transaction ID : D361354
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. EDD</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 800 Capitol Mall - MIC 83		Amount of Each Disbursement this Period 40.03
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Payroll Taxes	
Candidate Name		Transaction ID : D361360
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	122.49
<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 53 OF 84			
	<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 08 / 11 / 2015	
Mailing Address 38 Ivy Street SE			Amount of Each Disbursement this Period 3500.00	
City Washington	State DC	Zip Code 20003	Transaction ID : D361369	
Purpose of Disbursement Fundraising Consulting Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 08 / 11 / 2015	
Mailing Address 38 Ivy Street SE			Amount of Each Disbursement this Period 101.00	
City Washington	State DC	Zip Code 20003	Transaction ID : D361370	
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: 2016 <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 07 / 08 / 2015	
Mailing Address 38 Ivy Street SE			Amount of Each Disbursement this Period 3500.00	
City Washington	State DC	Zip Code 20003	Transaction ID : D361347	
Purpose of Disbursement Fundraising Consulting Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7101.00
<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 54 OF 84			
	<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 07 / 08 / 2015	
Mailing Address 38 Ivy Street SE			Amount of Each Disbursement this Period 279.56	
City Washington	State DC	Zip Code 20003	Transaction ID : D361348	
Purpose of Disbursement Fundraising Consulting Expenses		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <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 09 / 17 / 2015	
Mailing Address 38 Ivy Street SE			Amount of Each Disbursement this Period 3500.00	
City Washington	State DC	Zip Code 20003	Transaction ID : D361395	
Purpose of Disbursement Fundraising Consulting Fees		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <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 09 / 17 / 2015	
Mailing Address 38 Ivy Street SE			Amount of Each Disbursement this Period 283.57	
City Washington	State DC	Zip Code 20003	Transaction ID : D361396	
Purpose of Disbursement Fundraising Consulting Expenses		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4063.13
<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 55 OF 84			
	<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 Svc Discount</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 19.95 <b>Transaction ID : D361391</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: 2016 <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 Svc Discount</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 117.25 <b>Transaction ID : D361340</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: 2016 <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 Svc Discount</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 277.48 <b>Transaction ID : D361364</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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	414.68
<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 56 OF 84	
	<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 Svc Interchange Fee</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 68.29
City Fort Lauderdale	State FL	
Zip Code 33314	Purpose of Disbursement Merchant Fees	Transaction ID : D361337
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 Svc Interchange Fee</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 197.29
City Fort Lauderdale	State FL	
Zip Code 33314	Purpose of Disbursement Merchant Fees	Transaction ID : D361363
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 Svc Interchange Fee</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 415.93
City Fort Lauderdale	State FL	
Zip Code 33314	Purpose of Disbursement Merchant Fees	Transaction ID : D361394
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	681.51
<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 57 OF 84			
	<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 08 / 31 / 2015	
Mailing Address 150 E. Olive Avenue, Ste. 208			Amount of Each Disbursement this Period 2397.53	
City Burbank	State CA	Zip Code 91502	Transaction ID : D361377	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 09 / 15 / 2015	
Mailing Address 150 E. Olive Avenue, Ste. 208			Amount of Each Disbursement this Period 2396.98	
City Burbank	State CA	Zip Code 91502	Transaction ID : D361378	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 09 / 30 / 2015	
Mailing Address 150 E. Olive Avenue, Ste. 208			Amount of Each Disbursement this Period 2396.98	
City Burbank	State CA	Zip Code 91502	Transaction ID : D361379	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7191.49
<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 58 OF 84		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Patricia Horton</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address 150 E. Olive Avenue, Ste. 208		Amount of Each Disbursement this Period 2377.62 <b>Transaction ID : D361352</b>
City Burbank	State CA	
Zip Code 91502	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <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 08 / 11 / 2015
Mailing Address 150 E. Olive Avenue, Ste. 208		Amount of Each Disbursement this Period 2954.69 <b>Transaction ID : D361371</b>
City Burbank	State CA	
Zip Code 91502	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <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 07 / 31 / 2015
Mailing Address 150 E. Olive Avenue, Ste. 208		Amount of Each Disbursement this Period 2377.62 <b>Transaction ID : D361358</b>
City Burbank	State CA	
Zip Code 91502	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7709.93
<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 84			
	<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 07 / 31 / 2015
Mailing Address P.O. Box 409101		Amount of Each Disbursement this Period 610.01 <b>Transaction ID : D361359</b>
City Ogden	State UT	
Zip Code 84201	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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address P.O. Box 409101		Amount of Each Disbursement this Period 857.13 <b>Transaction ID : D361372</b>
City Ogden	State UT	
Zip Code 84201	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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address P.O. Box 409101		Amount of Each Disbursement this Period 610.01 <b>Transaction ID : D361353</b>
City Ogden	State UT	
Zip Code 84201	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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2077.15
<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 60 OF 84			
	<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 09 / 30 / 2015
Mailing Address P.O. Box 409101		Amount of Each Disbursement this Period 618.53 <b>Transaction ID : D361380</b>
City Ogden	State UT	
Purpose of Disbursement Payroll Taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address P.O. Box 409101		Amount of Each Disbursement this Period 618.53 <b>Transaction ID : D361381</b>
City Ogden	State UT	
Purpose of Disbursement Payroll Taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address P.O. Box 409101		Amount of Each Disbursement this Period 618.53 <b>Transaction ID : D361382</b>
City Ogden	State UT	
Purpose of Disbursement Payroll Taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1855.59
<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 84			
	<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. Mark Kadesh</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2015
Mailing Address 147 Tennessee Ave. NE		Amount of Each Disbursement this Period 236.01 <b>Transaction ID : D361601</b>
City Washington State DC Zip Code 20002-6425	Purpose of Disbursement Fundraising - Food & Beverages	
Candidate Name	Category/Type	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hilda Kasimian</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2015
Mailing Address 1780 Cielito Dr.		Amount of Each Disbursement this Period 2028.97 <b>Transaction ID : D361260</b>
City Glendale State CA Zip Code 91207	Purpose of Disbursement Food & Beverages	
Candidate Name	Category/Type	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dr. Stepan Kasimian</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2015
Mailing Address 1780 Cielito Dr.		Amount of Each Disbursement this Period 2028.98 <b>Transaction ID : D361261</b>
City Glendale State CA Zip Code 91207	Purpose of Disbursement Food & Beverages	
Candidate Name	Category/Type	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4293.96
<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 62 OF 84	
	<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 08 / 11 / 2015
Mailing Address 777 S. Figueroa Street, Ste. 4050		Amount of Each Disbursement this Period 3850.00 <b>Transaction ID : D361366</b>
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Legal & Treasury Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kaufman Legal Group</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 777 S. Figueroa Street, Ste. 4050		Amount of Each Disbursement this Period 135.64 <b>Transaction ID : D361401</b>
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Legal & Treasury Expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kaufman Legal Group</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address 777 S. Figueroa Street, Ste. 4050		Amount of Each Disbursement this Period 1925.00 <b>Transaction ID : D361389</b>
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Legal & Treasury Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5910.64
<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 84			
	<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. Merchant Bankcard Fee**

Full Name (Last, First, Middle Initial)  
Mailing Address 808 East Utah Valley Dr.

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 03 / 2015

Amount of Each Disbursement this Period: 25.00

Transaction ID : D361392

**B. Merchant Bankcard Fee**

Full Name (Last, First, Middle Initial)  
Mailing Address 808 East Utah Valley Dr.

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 03 / 2015

Amount of Each Disbursement this Period: 25.00

Transaction ID : D361365

**C. Merchant Bankcard Fee**

Full Name (Last, First, Middle Initial)  
Mailing Address 808 East Utah Valley Dr.

City American Fork State UT Zip Code 84003

Purpose of Disbursement Merchant Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 03 / 2015

Amount of Each Disbursement this Period: 25.00

Transaction ID : D361336

**SUBTOTAL** of Disbursements This Page (optional) ..... 75.00

**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 64 OF 84			
	<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. NGP VAN, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015	
Mailing Address 1225 Eye Street NW, Ste. 1225			Amount of Each Disbursement this Period 2100.00	
City Washigton	State DC	Zip Code 20005	Transaction ID : D361390	
Purpose of Disbursement Database Licensing Fees		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <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 09 / 30 / 2015	
Mailing Address 5435 Madison Avenue			Amount of Each Disbursement this Period 64.00	
City Sacramento	State CA	Zip Code 95841	Transaction ID : D361386	
Purpose of Disbursement Payroll Services		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <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 09 / 15 / 2015	
Mailing Address 5435 Madison Avenue			Amount of Each Disbursement this Period 64.00	
City Sacramento	State CA	Zip Code 95841	Transaction ID : D361387	
Purpose of Disbursement Payroll Services		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2228.00
<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 65 OF 84			
	<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 08 / 31 / 2015
Mailing Address 5435 Madison Avenue			Amount of Each Disbursement this Period 64.00 <b>Transaction ID : D361388</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: 2016 <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 08 / 14 / 2015
Mailing Address 5435 Madison Avenue			Amount of Each Disbursement this Period 64.00 <b>Transaction ID : D361374</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: 2016 <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 07 / 31 / 2015
Mailing Address 5435 Madison Avenue			Amount of Each Disbursement this Period 64.00 <b>Transaction ID : D361361</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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	192.00
<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 66 OF 84			
	<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 07 / 15 / 2015
Mailing Address 5435 Madison Avenue			Amount of Each Disbursement this Period 64.00
City Sacramento	State CA	Zip Code 95841	
Purpose of Disbursement Payroll Services		Candidate Name	Transaction ID : D361355
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Thomas Realty, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address 150 E. Olive Avenue, Ste. 308			Amount of Each Disbursement this Period 1200.00
City Burbank	State CA	Zip Code 91502	
Purpose of Disbursement Office Rent		Candidate Name	Transaction ID : D361357
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Thomas Realty, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2015
Mailing Address 150 E. Olive Avenue, Ste. 308			Amount of Each Disbursement this Period 1200.00
City Burbank	State CA	Zip Code 91502	
Purpose of Disbursement Office Rent		Candidate Name	Transaction ID : D361376
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2464.00
<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 67 OF 84			
	<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, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2015
Mailing Address 150 E. Olive Avenue, Ste. 308		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : D361400</b>
City Burbank State CA Zip Code 91502	Purpose of Disbursement Office Rent	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chase Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 3082.03 <b>Transaction ID : D360934</b>
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Adobe Systems, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address 345 Park Avenue		Amount of Each Disbursement this Period 39.99 <b>Transaction ID : D360948</b> <b>[MEMO ITEM]</b>
City San Jose State CA Zip Code 95110	Purpose of Disbursement Computer Software Expense	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4282.03
<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 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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**

Full Name (Last, First, Middle Initial) <b>A. Anthem Blue Cross</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address P.O. Box 54010		Amount of Each Disbursement this Period 1583.00
City Los Angeles	State CA	
Zip Code 90054-0010	Purpose of Disbursement Health Insurance	Transaction ID : D360946 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 07 / 24 / 2015
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 45.00
City Phoenix	State AZ	
Zip Code 85062-8225	Purpose of Disbursement Telephone Services	Transaction ID : D360942 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 07 / 24 / 2015
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 174.94
City Phoenix	State AZ	
Zip Code 85062-8225	Purpose of Disbursement Telephone Services	Transaction ID : D360949 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 69 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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. Counterintuity LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 348 E. Olive Avenue, Ste. D

City Burbank State CA Zip Code 91502

Purpose of Disbursement Technology Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 07 / 24 / 2015

Amount of Each Disbursement this Period 436.00

Transaction ID : D360941

[MEMO ITEM]

**B. National Democratic Club**

Full Name (Last, First, Middle Initial)

Mailing Address 30 Ivy Street SE

City Washington State DC Zip Code 20003-4071

Purpose of Disbursement Meal Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 07 / 24 / 2015

Amount of Each Disbursement this Period 10.00

Transaction ID : D360943

[MEMO ITEM]

**C. National Democratic Club**

Full Name (Last, First, Middle Initial)

Mailing Address 30 Ivy Street SE

City Washington State DC Zip Code 20003-4071

Purpose of Disbursement Meal Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 07 / 24 / 2015

Amount of Each Disbursement this Period 480.10

Transaction ID : D360944

[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 70 OF 84			
	<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 07 / 24 / 2015
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 111.03
City Coppell	State TX	
Zip Code 75019		
Purpose of Disbursement Cellular Services		Category/ Type
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <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 07 / 24 / 2015
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 30.00
City Coppell	State TX	
Zip Code 75019		
Purpose of Disbursement Cellular Services		Category/ Type
Candidate Name		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <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 09 / 22 / 2015
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 4371.56
City Palatine	State IL	
Zip Code 60094-4014		
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4371.56
<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 71 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Adobe Systems, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 345 Park Avenue		Amount of Each Disbursement this Period 39.99
City San Jose	State CA	
Zip Code 95110	Purpose of Disbursement Computer Software Expense	Transaction ID : D361273
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 45.00
City Phoenix	State AZ	
Zip Code 85062-8225	Purpose of Disbursement Telephone Services	Transaction ID : D360971
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>c. City of Burbank</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 275 East Olive Avenue		Amount of Each Disbursement this Period 93.07
City Burbank	State CA	
Zip Code 91502	Purpose of Disbursement Utilities	Transaction ID : D360955
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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).....	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 72 OF 84			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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**

Full Name (Last, First, Middle Initial) <b>A. Delta Air Lines, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 317.10
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Airfare	Candidate Name	Transaction ID : D360960
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>B. Delta Air Lines, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 25.00
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Airfare	Candidate Name	Transaction ID : D360961
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>C. Delta Air Lines, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 50.00
City Atlanta	State GA Zip Code 30354	
Purpose of Disbursement Airfare	Candidate Name	Transaction ID : D360962
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
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 73 OF 84			
	<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. Delta Air Lines, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015		
Mailing Address 1030 Delta Boulevard			Amount of Each Disbursement this Period 50.00		
City Atlanta	State GA	Zip Code 30354	Transaction ID : D360963		
Purpose of Disbursement Airfare		Category/ Type	[MEMO ITEM]		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Gordon Biersch</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015		
Mailing Address 145 S. San Fernando Blvd.			Amount of Each Disbursement this Period 47.13		
City Burbank	State CA	Zip Code 91502	Transaction ID : D361264		
Purpose of Disbursement Meal Expense		Category/ Type	[MEMO ITEM]		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Gordon Biersch</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015		
Mailing Address 145 S. San Fernando Blvd.			Amount of Each Disbursement this Period 109.43		
City Burbank	State CA	Zip Code 91502	Transaction ID : D361269		
Purpose of Disbursement Meal Expense		Category/ Type	[MEMO ITEM]		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 74 OF 84			
	<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. Gordon Biersch</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 145 S. San Fernando Blvd.		Amount of Each Disbursement this Period 64.40
City Burbank	State CA Zip Code 91502	
Purpose of Disbursement Meal Expense	Candidate Name	Transaction ID : D361272
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>B. Harvard Club of New York City</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 35 West 44th Street		Amount of Each Disbursement this Period 238.73
City New York	State NY Zip Code 10036	
Purpose of Disbursement Candidate Travel Expense	Candidate Name	Transaction ID : D361263
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>c. Hawk 'n' Dove</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 329 Pennsylvania Ave SE,		Amount of Each Disbursement this Period 103.57
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Meal Expense	Candidate Name	Transaction ID : D361274
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
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 75 OF 84			
	<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. Lunar Pages**

Mailing Address 1360 N Hancock Street

City Anaheim State CA Zip Code 92807

Purpose of Disbursement Web/Technology Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 08 / 25 / 2015

Amount of Each Disbursement this Period 19.95

Transaction ID : D361266

[MEMO ITEM]

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

Mailing Address 739 Main Rd.

City Aquebogue State NY Zip Code 11948

Purpose of Disbursement Meal Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 08 / 25 / 2015

Amount of Each Disbursement this Period 245.30

Transaction ID : D361262

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**c. Rayburn House Office Building**

Mailing Address 45 Independence Avenue SW

City Washington State DC Zip Code 20515

Purpose of Disbursement Meal Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 08 / 25 / 2015

Amount of Each Disbursement this Period 49.25

Transaction ID : D360967

[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 76 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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. The Liaison Capitol Hill**

Full Name (Last, First, Middle Initial)  
Mailing Address 415 New Jersey Ave NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Meal Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
08 / 25 / 2015

Amount of Each Disbursement this Period  
500.00

Transaction ID : D360956

[MEMO ITEM]

**B. The Liaison Capitol Hill**

Full Name (Last, First, Middle Initial)  
Mailing Address 415 New Jersey Ave NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Meal Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
08 / 25 / 2015

Amount of Each Disbursement this Period  
198.25

Transaction ID : D360975

[MEMO ITEM]

**c. The Monocle on Capitol Hill**

Full Name (Last, First, Middle Initial)  
Mailing Address 107 D St NE.

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Meal Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
08 / 25 / 2015

Amount of Each Disbursement this Period  
834.60

Transaction ID : D360968

[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 77 OF 84			
	<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 08 / 25 / 2015
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 000,000.00 108.76
City Coppell	State TX	
Zip Code 75019	Purpose of Disbursement Cellular Services	Transaction ID : D360972  [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 08 / 25 / 2015
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 000,000.00 317.50
City Coppell	State TX	
Zip Code 75019	Purpose of Disbursement Cellular Services	Transaction ID : D360973  [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 08 / 25 / 2015
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 000,000.00 30.00
City Coppell	State TX	
Zip Code 75019	Purpose of Disbursement Cellular Services	Transaction ID : D360974  [MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	000,000.00 0.00
<b>TOTAL</b> This Period (last page this line number only).....	000,000.00

**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 78 OF 84			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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**

Full Name (Last, First, Middle Initial) <b>A. Chase Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 2678.04
City Palatine	State IL	
Zip Code 60094-4014	Purpose of Disbursement Credit Card Payment. See Memo Item.	Transaction ID : D361275
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Adobe Systems, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 345 Park Avenue		Amount of Each Disbursement this Period 69.99
City San Jose	State CA	
Zip Code 95110	Purpose of Disbursement Computer Software Expense	Transaction ID : D361325
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 45.00
City Phoenix	State AZ	
Zip Code 85062-8225	Purpose of Disbursement Telephone Services	Transaction ID : D361296
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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).....	2678.04
<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 84			
	<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 09 / 22 / 2015
Mailing Address P.O. Box 78522		Amount of Each Disbursement this Period 175.39
City Phoenix	State AZ	
Zip Code 85062-8225	Category/ Type	<b>Transaction ID : D361276</b> <b>[MEMO ITEM]</b>
Purpose of Disbursement Telephone Services		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 09 / 22 / 2015
Mailing Address 275 East Olive Avenue		Amount of Each Disbursement this Period 269.86
City Burbank	State CA	
Zip Code 91502	Category/ Type	<b>Transaction ID : D361323</b> <b>[MEMO ITEM]</b>
Purpose of Disbursement Utilities		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Counterintuity LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 348 E. Olive Avenue, Ste. D		Amount of Each Disbursement this Period 109.00
City Burbank	State CA	
Zip Code 91502	Category/ Type	<b>Transaction ID : D361330</b> <b>[MEMO ITEM]</b>
Purpose of Disbursement Technology Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 80 OF 84			
	<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 09 / 22 / 2015
Mailing Address 348 E. Olive Avenue, Ste. D		Amount of Each Disbursement this Period 000,000.00 109.00
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: 2016 <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 09 / 22 / 2015
Mailing Address 348 E. Olive Avenue, Ste. D		Amount of Each Disbursement this Period 000,000.00 109.00
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lunar Pages</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 1360 N Hancock Street		Amount of Each Disbursement this Period 000,000.00 166.80
City Anaheim	State CA	
Purpose of Disbursement Web/Technology Expense	Zip Code 92807	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 81 OF 84			
	<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 09 / 22 / 2015
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 134.69
City Coppell	State TX	
Zip Code 75019	Purpose of Disbursement Cellular Services	Transaction ID : D361300 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 09 / 22 / 2015
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 316.75
City Coppell	State TX	
Zip Code 75019	Purpose of Disbursement Cellular Services	Transaction ID : D361294 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Woo Lae Oak</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 8240 Leesburg Pike		Amount of Each Disbursement this Period 212.00
City Vienna	State VA	
Zip Code 22182	Purpose of Disbursement Meal Expense	Transaction ID : D361312 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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).....	62639.37

**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 84
	<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. Democratic Congressional Campaign Cmte.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2015
Mailing Address 430 South Capitol Street, SE		Amount of Each Disbursement this Period 12500.00 <b>Transaction ID : D361367</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Federal Contribution Transfer 439a(a)	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 08 / 11 / 2015
Mailing Address 430 South Capitol Street, SE		Amount of Each Disbursement this Period 12500.00 <b>Transaction ID : D361368</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Federal Contribution Transfer 439a(a)	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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 09 / 17 / 2015
Mailing Address 430 South Capitol Street, SE		Amount of Each Disbursement this Period 12500.00 <b>Transaction ID : D361397</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Federal Contribution Transfer 439a(a)	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	37500.00
<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 83 OF 84
	<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. Glendale Healthy Kids</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015
Mailing Address 223 North Jackson Street		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : D361398</b>
City Glendale	State CA	
Zip Code 91206	Purpose of Disbursement Civic Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. NWPC Greater Pasadena</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 942 S. Oakland Ave.		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D361341</b>
City Pasadena	State CA	
Zip Code 91106	Purpose of Disbursement Civic Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <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 09 / 22 / 2015
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D361474</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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2050.00
<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 84			
	<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. La Canada/La Crescenta Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address PO Box 321		Amount of Each Disbursement this Period 300.00
City La Canada Flintridge	State CA	
Zip Code 91012	Purpose of Disbursement Non Federal Contribution	Transaction ID : D361475
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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. Chase Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 415.00
City Palatine	State IL	
Zip Code 60094-4014	Purpose of Disbursement Credit Card Payment. See Memo Item.	Transaction ID : D361477
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Stonewall Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 8527 Santa Monica Boulevard		Amount of Each Disbursement this Period 250.00
City West Hollywood	State CA	
Zip Code 90069	Purpose of Disbursement Federal Contribution	Transaction ID : D361311
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <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).....	415.00
<b>TOTAL</b> This Period (last page this line number only).....	39965.00