

**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

HALL FOR CONGRESS 2016

ADDRESS (number and street)

249 E. Ocean Blvd. Suite 685



Check if different than previously reported. (ACC)

Long Beach

CA

90802

2. FEC IDENTIFICATION NUMBER ▼

C C00497859

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CA

44

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2016

2016

through

M M / D D / Y Y Y Y

03 / 31 / 2016

2016

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 David L. Gould

Signature of Treasurer

David L. Gould

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 15 / 2016

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**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 100

Write or Type Committee Name

HALL FOR CONGRESS 2016

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

	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))....	147840.67	865397.05
(b) Total Contribution Refunds (from Line 20(d))	500.00	7853.82
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	147340.67	857543.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	176578.32	409255.48
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	176578.32	409255.48
8. Cash on Hand at Close of Reporting Period (from Line 27)	513446.38	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	57454.36	

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

PAGE 3 / 100

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

HALL FOR CONGRESS 2016

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

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).....

80173.17

568654.22

(ii) Unitemized.....

300.00

2407.00

(iii) TOTAL of contributions
from individuals ▶

80473.17

571061.22

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs).....

67367.50

294335.83

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

147840.67

865397.05

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

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

147840.67

865397.05

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 100

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	176578.32	409255.48
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	500.00	4853.82
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	3000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500.00	7853.82
21. OTHER DISBURSEMENTS	0.00	1950.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	177078.32	419059.30

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	542684.03
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	147840.67
25. SUBTOTAL (add Line 23 and Line 24).....	690524.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	177078.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	513446.38

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

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

FOR LINE NUMBER:

PAGE 5 OF 100

(check only one)

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

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)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		03		2016

Transaction ID : INCA910

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Delilah Lanoix

Mailing Address 915 Wilshire Blvd. Suite 1820

City

Los Angeles

State

CA

Zip Code

90017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SMS Transportation

Business Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		05		2016

Transaction ID : NONA869

Amount of Each Receipt this Period

1700.00

☐ Memo Item
Fundraiser Event

Full Name (Last, First, Middle Initial)

C. Delilah Lanoix

Mailing Address 915 Wilshire Blvd. Suite 1820

City

Los Angeles

State

CA

Zip Code

90017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SMS Transportation

Business Owner

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		05		2016

Transaction ID : NONA870

Amount of Each Receipt this Period

100.00

☐ Memo Item
Fundraiser Event

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

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

1855.00

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

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

FOR LINE NUMBER:

PAGE 6 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		10		2016

Transaction ID : INCA865

Amount of Each Receipt this Period

13.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		17		2016

Transaction ID : INCA879

Amount of Each Receipt this Period

202.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2016

Transaction ID : INCA884

Amount of Each Receipt this Period

1021.32

☐ Memo Item

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

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

1236.64

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

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

FOR LINE NUMBER:

PAGE 7 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Kyle John Gehring

Mailing Address 12438 Coconut Row Rd.

City

Palm Beach Gardens

State

FL

Zip Code

33410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nitroblu ProductionsOccupation
Producer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2016

Transaction ID : IDTA493

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Kyle John Gehring

Mailing Address 12438 Coconut Row Rd.

City

Palm Beach Gardens

State

FL

Zip Code

33410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nitroblu ProductionsOccupation
Producer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2016

Transaction ID : IDTA494

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2016

Transaction ID : INCA896

Amount of Each Receipt this Period

1105.00

☐ Memo Item

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

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

1105.00

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

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

FOR LINE NUMBER:

PAGE 8 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Shannon Fuller

A.

Mailing Address 32 Whitehall Dr.

City

Orinda

State

CA

Zip Code

94563

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shannon Fuller

Occupation

Community Volunteer Fundraiser

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2016

Transaction ID : IDTA502

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Actblue

B.

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2016

Transaction ID : INCA907

Amount of Each Receipt this Period

58.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

Actblue

C.

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2016

Transaction ID : INCA915

Amount of Each Receipt this Period

47.32

☐ Memo Item

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

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

105.57

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

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

FOR LINE NUMBER:

PAGE 9 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2016

Transaction ID : INCA921

Amount of Each Receipt this Period

31.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2016

Transaction ID : INCA943

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. H. F. II Boeckmann

Mailing Address 15505 Roscoe Blvd.

City

North Hills

State

CA

Zip Code

91343

FEC ID number of contributing
federal political committee.

C

Name of Employer

Galpin Motors, Inc.

Occupation

Owner/CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : INCA947

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1036.32

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 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Kathleen Clark Kies

A.

Mailing Address 6109 Franklin Park Rd.

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Federal Policy Group

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : INCA948

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Eric Alan Eklund

B.

Mailing Address 28691 Via Pasatiempo

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prism Realty

Occupation

Commercial Real Estate

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : INCA955

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Eric Alan Eklund

C.

Mailing Address 28691 Via Pasatiempo

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prism Realty

Occupation

Commercial Real Estate

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : INCA954

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
HALL FOR CONGRESS 2016

A. Full Name (Last, First, Middle Initial) Donald J. Ellis			Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2016	
Mailing Address 2 Palermo			Transaction ID : INCA953	
City	State	Zip Code	Amount of Each Receipt this Period _____ 200.00	
Irvine	CA	92614	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C _____	Amount of Each Receipt this Period _____ 200.00	
Name of Employer Collins International		Occupation Commercial Real Estate	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 200.00	<input type="checkbox"/> Memo Item	
B. Full Name (Last, First, Middle Initial) Alix Franzblau			Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2016	
Mailing Address 644 Hudson Ave.,			Transaction ID : INCA950	
City	State	Zip Code	Amount of Each Receipt this Period _____ 2500.00	
Tampa	FL	33606	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C _____	Amount of Each Receipt this Period _____ 2500.00	
Name of Employer Thompson & Co Of Tampa Inc.		Occupation Executive	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 2500.00	<input type="checkbox"/> Memo Item	
C. Full Name (Last, First, Middle Initial) Michael A. Gold			Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2016	
Mailing Address 1524 W Voltz Rd.			Transaction ID : INCA949	
City	State	Zip Code	Amount of Each Receipt this Period _____ 1000.00	
Northbrook	IL	60062	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee.		C _____	Amount of Each Receipt this Period _____ 1000.00	
Name of Employer Arnold Group		Occupation Executive	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1000.00	<input type="checkbox"/> Memo Item	
SUBTOTAL of Receipts This Page (optional).....			_____ 3700.00	
TOTAL This Period (last page this line number only).....			_____	

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

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

FOR LINE NUMBER:

PAGE 12 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Steve Levissee

A.

Mailing Address 8 Alegria

City

Irvine

State

CA

Zip Code

92620

FEC ID number of contributing
federal political committee.

C

Name of Employer
PBLA Engineering, Inc.Occupation
Engineer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : INCA958

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Eric M. Newman

B.

Mailing Address 3406 W Bay Vista Ave.

City

Tampa

State

FL

Zip Code

33611

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.C. Newman Cigar CompanyOccupation
President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : INCA952

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Robert C. Newman

C.

Mailing Address 3102 S Beach Drive

City

Tampa

State

FL

Zip Code

33629

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.C. Newman Cigar CompanyOccupation
Executive Vice President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : INCA951

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

William Eric Paulsen

Mailing Address 3189 Airway Ave. #B

City

Costa Mesa

State

CA

Zip Code

92660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prism Realty Corp.

Occupation

Developer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : INCA956

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2016

Transaction ID : INCA966

Amount of Each Receipt this Period

86.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2016

Transaction ID : INCA974

Amount of Each Receipt this Period

1586.32

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

1872.32

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Sylvia Carlisle

Mailing Address 5647 W. 64th St.

City

Los Angeles

State

CA

Zip Code

90056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anthem Blue Cross

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2016

Transaction ID : IDTA535

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Cynthia Hill

Mailing Address 727 West 7th St. #1425

City

Los Angeles

State

CA

Zip Code

90017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Strategic Counsel

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2016

Transaction ID : IDTA534

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Jim Mangia

Mailing Address 2520 7th Ave.

City

Los Angeles

State

CA

Zip Code

90018

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. John's Well Child & Family Center

Occupation

President & CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

Transaction ID : INCA970

Amount of Each Receipt this Period

1000.00

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

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

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

FOR LINE NUMBER:

PAGE 15 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2016

Transaction ID : INCA981

Amount of Each Receipt this Period

12.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John Ek

Mailing Address 461 W. 6th Street #233

City

San Pedro

State

CA

Zip Code

90731

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Ek & Ek

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2016

Transaction ID : INCA984

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John Ek

Mailing Address 461 W. 6th Street #233

City

San Pedro

State

CA

Zip Code

90731

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Ek & Ek

President

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2016

Transaction ID : INCA985

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

2812.32

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

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

FOR LINE NUMBER:

PAGE 16 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 14 Arrow St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

135156.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2016

Transaction ID : INCA1030

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dan Domonoske

Mailing Address 922 East E St.

City

Wilmington

State

CA

Zip Code

90744

FEC ID number of contributing
federal political committee.

C

Name of Employer

Potential Industries, Inc.

Occupation

VP

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2016

Transaction ID : IDTA544

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. L.I.E.U. Leadership PAC

Mailing Address 1600 Rosecrans Avenue, 4th Floor

City

Manhattan Beach

State

CA

Zip Code

90266

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2016

Transaction ID : IDTA545

Amount of Each Receipt this Period

1000.00

☒ Memo Item

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 17 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Douglas Michael Francis

A.

Mailing Address 19 Bell Pasture Rd.

City

Ladera Ranch

State

CA

Zip Code

92694

FEC ID number of contributing
federal political committee.

C

Name of Employer

Weedmaps

Occupation

CEO

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA994

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Douglas Michael Francis

B.

Mailing Address 19 Bell Pasture Rd.

City

Ladera Ranch

State

CA

Zip Code

92694

FEC ID number of contributing
federal political committee.

C

Name of Employer

Weedmaps

Occupation

CEO

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA993

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Rebecca Marie Francis

C.

Mailing Address 19 Bell Pasture Rd.

City

Ladera Ranch

State

CA

Zip Code

92694

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA1001

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

8100.00

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

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

FOR LINE NUMBER:

PAGE 18 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Rebecca Marie Francis

A.

Mailing Address 19 Bell Pasture Rd.

City

Ladera Ranch

State

CA

Zip Code

92694

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA1002

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Justin Hartfield

B.

Mailing Address 9900 Research Dr.

City

Irvine

State

CA

Zip Code

92618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Weedmaps

Occupation

Chairman

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA991

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Justin Hartfield

C.

Mailing Address 9900 Research Dr.

City

Irvine

State

CA

Zip Code

92618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Weedmaps

Occupation

Chairman

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA997

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

8100.00

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 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Melissa Anne Hartfield

A.

Mailing Address 9900 Research Dr.

City

Irvine

State

CA

Zip Code

92618

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA998

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Melissa Anne Hartfield

B.

Mailing Address 9900 Research Dr.

City

Irvine

State

CA

Zip Code

92618

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA992

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mel Howard

C.

Mailing Address 1105 S. Alameda

City

Compton

State

CA

Zip Code

90220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Coast Waste & Recycling LLC

Occupation

Business Owner

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

3700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA1005

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

8100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 100

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

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NAME OF COMMITTEE (In Full)
HALL FOR CONGRESS 2016

A. Full Name (Last, First, Middle Initial) Ani Kaprielian		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016	
Mailing Address 10345 Woodbridge Street		Transaction ID : INCA996	
City Toluca Lake	State CA	Zip Code 91602	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Nationwide Environmental Services	Occupation Vice President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
B. Full Name (Last, First, Middle Initial) Wajiha Riaz Siddiqui		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016	
Mailing Address 9663 Santa Monica Blvd. Unit 1106		Transaction ID : INCA995	
City Beverly Hills	State CA	Zip Code 90210	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Self Employed	Occupation Business Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		
C. Full Name (Last, First, Middle Initial) Bernard Steimann		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2016	
Mailing Address 9 Macarthur Pl. Unit 707		Transaction ID : INCA999	
City Santa Ana	State CA	Zip Code 92707	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Self Employed	Occupation Business Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		
SUBTOTAL of Receipts This Page (optional).....		6400.00	
TOTAL This Period (last page this line number only).....			

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

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

FOR LINE NUMBER:

PAGE 21 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Jamie L. Tierney

Mailing Address 722 20th Street

City

Santa Monica

State

CA

Zip Code

90402

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA1000

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. David Welch

Mailing Address 849 S. Broadway Apt 301

City

Los Angeles

State

CA

Zip Code

90014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA1003

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Allpuk Chu

Mailing Address 27385 Eastvale Rd.

City

Palos Verdes Estat

State

CA

Zip Code

90274

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allpuk Chu

Occupation

VP

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2016

Transaction ID : INCA1023

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

7900.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)
HALL FOR CONGRESS 2016

A. Full Name (Last, First, Middle Initial) Allpuk Chu		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2016	
Mailing Address 27385 Eastvale Rd.		Transaction ID : INCA1024	
City Palos Verdes Estat	State CA	Zip Code 90274	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Allpuk Chu	Occupation VP		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3100.00		
B. Full Name (Last, First, Middle Initial) Stan K Chu		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2016	
Mailing Address 27385 Eastvale Road		Transaction ID : INCA1021	
City Palos Verdes	State CA	Zip Code 90274	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Self Employed	Occupation Business Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		
C. Full Name (Last, First, Middle Initial) Stan K Chu		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2016	
Mailing Address 27385 Eastvale Road		Transaction ID : INCA1022	
City Palos Verdes	State CA	Zip Code 90274	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Self Employed	Occupation Business Owner		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		
SUBTOTAL of Receipts This Page (optional).....		3300.00	
TOTAL This Period (last page this line number only).....			

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Habco Media LLC

A.

Mailing Address 5721 Topeka Dr.

City

Tarzana

State

CA

Zip Code

91356

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2016

Transaction ID : INCA1020

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ehab Haddad

B.

Mailing Address 5721 Topeka Dr.

City

Tarzana

State

CA

Zip Code

91356

FEC ID number of contributing
federal political committee.

C

Name of Employer

Habco Media LLC

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2016

Transaction ID : IDTA543

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Pechanga Band of Luiseno

C.

Mailing Address P.O. Box 1477

City

Temecula

State

CA

Zip Code

92593

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2016

Transaction ID : INCA1013

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 100
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial) A. Steven Ward			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2016	
Mailing Address 4243 Don Carlos Dr.			Transaction ID : INCA1019	
City Los Angeles	State CA	Zip Code 90008	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer 405 Motor Sport		Occupation CEO		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Actblue			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 14 Arrow St.			Transaction ID : INCA1066	
City Cambridge	State MA	Zip Code 02138	Amount of Each Receipt this Period 5300.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer		Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 135156.60		

Full Name (Last, First, Middle Initial) C. Chris Brown			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 8306 Wilshire Blvd. Suite 230			Transaction ID : IDTA552	
City Beverly Hills	State CA	Zip Code 90211	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item <input checked="" type="checkbox"/>		
Name of Employer AMR LLC		Occupation Consultant		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00		

SUBTOTAL of Receipts This Page (optional).....			5800.00	
TOTAL This Period (last page this line number only).....				

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

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

FOR LINE NUMBER:

PAGE 25 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Chris Brown

A.

Mailing Address 8306 Wilshire Blvd. Suite 230

City

Beverly Hills

State

CA

Zip Code

90211

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMR LLC

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : IDTA551

Amount of Each Receipt this Period

2600.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Jim Cooper

B.

Mailing Address 1787 Tribute Rd. Suite K

City

Sacramento

State

CA

Zip Code

95815

FEC ID number of contributing
federal political committee.

C

Name of Employer

State of CA

Occupation

Assemblyman

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : IDTA546

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Stephen Liu

C.

Mailing Address 3 Chuckwagon Rd.

City

Rolling Hills

State

CA

Zip Code

90274

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Century Custom Services Inc.

Occupation

Customs Broker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : IDTA547

Amount of Each Receipt this Period

1000.00

☒ Memo Item

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

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

0.00

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

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

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PAGE 26 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Carrie McKinley

Mailing Address 6429 Surfside Way

City

Sacramento

State

CA

Zip Code

95831

FEC ID number of contributing
federal political committee.

C

Name of Employer

McKinley Pillows

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : IDTA548

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Choi

Mailing Address 930 w Hyde Park Blvd.

City

Inglewood

State

CA

Zip Code

90302

FEC ID number of contributing
federal political committee.

C

Name of Employer

MkC Customs Brokers, Int'l Inc.

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1118

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kenneth K. Chow

Mailing Address 1461 S. Ynez Ave.

City

Monterey Park

State

CA

Zip Code

91754

FEC ID number of contributing
federal political committee.

C

Name of Employer

Global Pearl Services

Occupation

Operation Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1121

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

400.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 27 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Joshua B. Cohen

Mailing Address 27 Stonewall Dr.

City

Livingston

State

NJ

Zip Code

07039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pearl

Occupation

President & CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1092

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Carl E. Dickerson

Mailing Address 490 Prospect Blvd.

City

Pasadena

State

CA

Zip Code

91103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dickerson Employee Benefits, Inc.

Occupation

Chairman & Founder

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1103

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Nickolas Lanza

Mailing Address 343 Blue Caern Pt.

City

Long Beach

State

CA

Zip Code

90803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Plethora Businesses

Occupation

Finance & Consulting

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1120

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

3150.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Tin W. Lau

A.

Mailing Address P.O. Box 3986

City

Rancho Cucamonga

State

CA

Zip Code

91729

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Independent Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1105

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Yoke Man-Yanlo

B.

Mailing Address 18528 Gramercy Place

City

Torrance

State

CA

Zip Code

90504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Triumph Link USA, Inc.

Occupation

Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1109

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lindsay C. Olson

C.

Mailing Address 10 Mustang Rd.

City

Rancho Palos Verde

State

CA

Zip Code

90275

FEC ID number of contributing
federal political committee.

C

Name of Employer

Crevushaw Lumber Co., Inc.

Occupation

Corp Officer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1112

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

750.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Patricia E. Phelps

A.

Mailing Address 1900 N. Quebec St.

City

Arlington

State

VA

Zip Code

22207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1029

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Jarow L. Rogovin

B.

Mailing Address 1368 Devlin Dr.

City

Los Angeles

State

CA

Zip Code

90069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jarow Formulas, Inc.

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1102

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Che Tai-Chuen

C.

Mailing Address 13726 Darvalle Street

City

Cerritos

State

CA

Zip Code

90703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Global Pearl Service

Occupation

Sales Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1108

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

3200.00

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

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

FOR LINE NUMBER:

PAGE 30 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Leor A. Trink

Mailing Address 7288 Mulholland Dr.

City

Los Angeles

State

CA

Zip Code

90068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Business Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1025

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Illi M. Tsai

Mailing Address 3901 Elma Rd.

City

Pasadena

State

CA

Zip Code

91107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Trimj Lind USA, Inc.

Occupation

Sales Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1107

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tinh Tu Bach

Mailing Address 2821 La Plata Ave.

City

Hacienda Heights

State

CA

Zip Code

91745

FEC ID number of contributing
federal political committee.

C

Name of Employer

Triumph Link USA Inc.

Occupation

Treasurer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1110

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

3200.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Linh Hue Van

Mailing Address 1614 Waverly Glen Way

City

Hacienda Heights

State

CA

Zip Code

91745

FEC ID number of contributing
federal political committee.

C

Name of Employer

Triumph Link USA, Inc.

Occupation

Operations Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1106

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Yong Ji Wang

Mailing Address 26715 Indian Peak Rd.

City

Rancho Palos Verde

State

CA

Zip Code

90275

FEC ID number of contributing
federal political committee.

C

Name of Employer

Makkoinc Haiping Zheng

Occupation

Vice President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1122

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Abraham William

Mailing Address 2107 Root St.

City

Fullerton

State

CA

Zip Code

92833

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

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1026

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

900.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Abraham Williams

Mailing Address 2107 Root Street

City

Fullerton

State

CA

Zip Code

92833

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

200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : INCA1119

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Wylie Wong

Mailing Address 1716 Flower Ave.

City

Torrance

State

CA

Zip Code

90503

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pillogistics

Occupation

Director of Logistics

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : INCA1111

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

400.00

80173.17

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 100

<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)
HALL FOR CONGRESS 2016

A. Full Name (Last, First, Middle Initial)
RJ Reynolds PAC

Mailing Address P.O. Box 718

City State Zip Code
Winston-Salem NC 27102

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	11	/	2016

Transaction ID : INCA846

Amount of Each Receipt this Period

2500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Rendon for Assembly 2016

Mailing Address 3605 Long Beach Blvd. Ste. 426

City State Zip Code
Long Beach CA 90807

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

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2016

Transaction ID : INCA868

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Machinists Non-Partisan Political League

Mailing Address 9000 Machinists Place

City State Zip Code
Upper Marlboro MD 20772

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2016

Transaction ID : INCA898

Amount of Each Receipt this Period

5000.00

☐ Memo Item**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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Praxair, Inc. Political Action Committee

Mailing Address 39 Old Ridgebury Rd.

City

Danbury

State

CT

Zip Code

06810

FEC ID number of contributing federal political committee.

C C00283440

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2016

Transaction ID : INCA899

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Verizon Communications Inc. Goof Government Club (VERIZON PAC)

Mailing Address 1300 I Street NW 4th Floor

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing federal political committee.

C C00186288

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

Transaction ID : INCA905

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Pace Of California School Employees Association Local, State, Federal Candidates

Mailing Address 555 Capitol Mall Ste. 1425

City

Sacramento

State

CA

Zip Code

95814

FEC ID number of contributing federal political committee.

C C00480830

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : INCA917

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 100

<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)
HALL FOR CONGRESS 2016

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

Mailing Address 714 Green Valley Rd.

City Greensboro	State NC	Zip Code 27408
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C C00587543

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M 03	/	D D D 03	/	Y Y Y Y Y Y 2016
-------------	---	-------------	---	---------------------

Transaction ID : INCA957

Amount of Each Receipt this Period

2500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Professional Engineers In California Government Fed PAC

Mailing Address 555 Capitol Mall Ste. 1425

City Sacramento	State CA	Zip Code 95814
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C C00459800

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M 03	/	D D D 04	/	Y Y Y Y Y Y 2016
-------------	---	-------------	---	---------------------

Transaction ID : INCA960

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Efren Martinez for Assembly 2016

Mailing Address 249 E. Ocean Blvd. Ste. 685

City Long Beach	State CA	Zip Code 90802
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M 03	/	D D D 22	/	Y Y Y Y Y Y 2016
-------------	---	-------------	---	---------------------

Transaction ID : INCA978

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

4500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 36 OF 100

(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Board of Equalization Member Horton 2014

Mailing Address 1787 Tribute Rd. Ste. K

City

Sacramento

State

CA

Zip Code

95815

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA988

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Realtors Political Action Committee R.P.A.C.

Mailing Address 430 N. Michigan Ave.

City

Chicago

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : INCA1004

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

San Francisco Bar Pilots Political Action Committee

Mailing Address Pier 9 East End

City

San Francisco

State

CA

Zip Code

94111

FEC ID number of contributing
federal political committee.

C C00329052

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4367.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2016

Transaction ID : NONA1117

Amount of Each Receipt this Period

367.50

☐ Memo Item

Fundraiser Event

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

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

6367.50

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

All Power to the People PAC

Mailing Address 499 South Capital St. S.W. Suite 4

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C C00483628

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1033

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Allergan, Inc. PAC Morris Corporate Center III

Mailing Address 400 Interpace Parkway Bldg A

City

Parsippany

State

NJ

Zip Code

07054

FEC ID number of contributing
federal political committee.

C C00391086

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1032

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

American Beverage Association PAC

Mailing Address 1101 16th St. NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C C00100107

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1039

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

6500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. American Federation of Teachers COPE-Voluntary A/C

Mailing Address 555 New Jersey Ave., NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing federal political committee.

C C00157545

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1061

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anheuser-Busch PAC (AB-PAC)

Mailing Address 1401 I St. NW Suite 200

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing federal political committee.

C C00034488

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1035

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. California Nations Indian Gaming Assoc PAC (CNIGA FED PAC)

Mailing Address 515 South Figueroa Street Ste. 111

City

Los Angeles

State

CA

Zip Code

90071

FEC ID number of contributing federal political committee.

C C00505974

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1100

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

9200.00

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 100

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

California Nations Indian Gaming Assoc PAC (CNIGA FED PAC)

Mailing Address 515 South Figueroa Street Ste. 111

City State Zip Code
 Los Angeles CA 90071

FEC ID number of contributing
federal political committee.

C C00505974

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
 03 31 2016

Transaction ID : INCA1101

Amount of Each Receipt this Period

2300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Carpenters' Legislative Improvement Committee

Mailing Address 101 Constitution Ave. NW 10th Fl.

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

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 31 2016

Transaction ID : INCA1028

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

International Organization Of Masters Mates & Pilots

Mailing Address 700 Maritime Blvd. Ste. B

City State Zip Code
 Linthicum MD 21090

FEC ID number of contributing
federal political committee.

C

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
 03 31 2016

Transaction ID : INCA1099

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

5800.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

Judy Chu For Congress

Mailing Address 16633 Ventura Blvd. #1008

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing
federal political committee.

C C00458125

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1096

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mortgage Bankers Association PAC

Mailing Address 1919 M. St. NW 5th Floor

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C C00004812

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1034

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

New Democrat Coalition PAC

Mailing Address 700 13th St. NW Suite 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 M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : INCA1037

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

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

7000.00

FOR LINE NUMBER:		PAGE 41 OF 100	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

NAME OF COMMITTEE (In Full)
HALL FOR CONGRESS 2016

Date of Receipt

MM / DD / YYYY

03 / 31 / 2016

Amount of Each Receipt this Period

4000.00

Memo Item

Date of Receipt

MM / DD / YYYY

03 / 31 / 2016

Amount of Each Receipt this Period

1000.00

Memo Item

Date of Receipt

MM / DD / YYYY

03 / 31 / 2016

Amount of Each Receipt this Period

1000.00

Memo Item

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)

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<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)
HALL FOR CONGRESS 2016

A. Full Name (Last, First, Middle Initial) The Boeing Company PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 929 Long Bridge Dr.		Transaction ID : INCA1036	
City Arlington	State VA	Zip Code 22202	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C C00142711		<input type="checkbox"/> Memo Item	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

B. Full Name (Last, First, Middle Initial) Unite Here Tip Campaign Committee		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 275 7th Ave 11th Floor		Transaction ID : INCA1038	
City New York	State NY	Zip Code 10001	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C C00004861		<input type="checkbox"/> Memo Item	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

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

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	67367.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

2.18

Purpose of Disbursement
Credit Card Processing Fee

003

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB911

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address P.O. Box 5025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

City	State	Zip Code
Carol Stream	IL	60197

Amount of Each Disbursement this Period

325.86

Purpose of Disbursement
Phone Service

001

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB797

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address Box 0001

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

City	State	Zip Code
Los Angeles	CA	90096

Amount of Each Disbursement this Period

4447.81

Purpose of Disbursement
Credit Card Payment

001

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB801

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)

State: District:

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

4775.85

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Regus

Mailing Address 222 West 6th Street Ste. 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

City	State	Zip Code
San Pedro	CA	90731

Amount of Each Disbursement this Period

968.44

Purpose of Disbursement
Rent/Lease

001

☒ Memo Item

Candidate Name

Category/
Type

Transaction ID : PDTB13EXPB801

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. United Airlines

Mailing Address 1200 E Algonquin Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

City	State	Zip Code
Elk Grove Village	IL	60007

Amount of Each Disbursement this Period

653.10

Purpose of Disbursement
Airfare Expense

002

☒ Memo Item

Candidate Name

Category/
Type

Transaction ID : PDTB14EXPB801

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)

C. Regus

Mailing Address 222 West 6th Street Ste. 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

City	State	Zip Code
San Pedro	CA	90731

Amount of Each Disbursement this Period

1010.85

Purpose of Disbursement
Rent/Lease

001

☒ Memo Item

Candidate Name

Category/
Type

Transaction ID : PDTB12EXPB801

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:

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

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Box 0001

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

City	State	Zip Code
Los Angeles	CA	90096

Amount of Each Disbursement this Period

Purpose of Disbursement
Credit Card Payment

001

2903.02

Candidate Name

☐ Memo Item

Transaction ID : EXPB803

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Alaska Airlines

Mailing Address P.O. Box 68900

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

City	State	Zip Code
Seattle	WA	98168

Amount of Each Disbursement this Period

Purpose of Disbursement
Airfare Expense

002

663.10

Candidate Name

☒ Memo Item

Transaction ID : PDTB8EXPB803

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 1200 E Algonquin Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

City	State	Zip Code
Elk Grove Village	IL	60007

Amount of Each Disbursement this Period

Purpose of Disbursement
Airfare Expense

002

200.00

Candidate Name

☒ Memo Item

Transaction ID : PDTB6EXPB803

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

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

2903.02

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 1200 E Algonquin Rd.

City	State	Zip Code
Elk Grove Village	IL	60007

Purpose of Disbursement
Airfare Expense

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

300.00

☒ Memo Item

Transaction ID : PDTB7EXPB803

B. Beacon Hotel & Corp

Mailing Address 1615 Rhode Island Ave. NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement
Lodging

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

348.09

☒ Memo Item

Transaction ID : PDTB9EXPB803

c. Best Buy

Mailing Address 230 Towne Center Dr.

City	State	Zip Code
Compton	CA	90220

Purpose of Disbursement
Office Expenses

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

623.17

☒ Memo Item

Transaction ID : PDTB10EXPB803

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. California Democratic Party

Mailing Address 1830 9th Street

City	State	Zip Code
Sacramento	CA	95811

Purpose of Disbursement
Donation

011

Candidate Name

California Democratic PartyCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

350.00

☒ Memo Item

Transaction ID : PDTB11EXPB803

B. Delilah Lanoix

Mailing Address 915 Wilshire Blvd. Suite 1820

City	State	Zip Code
Los Angeles	CA	90017

Purpose of Disbursement
Fundraiser EventCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

1700.00

☐ Memo Item

Transaction ID : NONB869

C. Delilah Lanoix

Mailing Address 915 Wilshire Blvd. Suite 1820

City	State	Zip Code
Los Angeles	CA	90017

Purpose of Disbursement
Fundraiser EventCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Transaction ID : NONB870

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

1800.00

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Austin/Egoscue Development

Mailing Address 4225 Myrtle Ave.

City	State	Zip Code
Long Beach	CA	90807

Purpose of Disbursement
Fundraiser Management Fee

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2016

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Transaction ID : EXPB808

B. Gould & Orellana LLC

Mailing Address 249 E. Ocean Blvd., #685

City	State	Zip Code
Long Beach	CA	90802

Purpose of Disbursement
PAC Management/Political Reporting Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2016

Amount of Each Disbursement this Period

4050.00

☐ Memo Item

Transaction ID : EXPB811

C. Gould & Orellana LLC

Mailing Address 249 E. Ocean Blvd., #685

City	State	Zip Code
Long Beach	CA	90802

Purpose of Disbursement
Office Expenses

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2016

Amount of Each Disbursement this Period

220.28

☐ Memo Item

Transaction ID : EXPB812

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

10270.28

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. NGP Van, Inc.

Mailing Address 1101 15th Street NW Ste. 500

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Online Fundraiser Services

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2016

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Transaction ID : EXPB810

B. VOTER GUIDE SLATE CARDS

Mailing Address 6285 E. Spring St., #202

City	State	Zip Code
Long Beach	CA	90808

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2016

Amount of Each Disbursement this Period

3900.00

☐ Memo Item

Transaction ID : EXPB831

c. Brandon Stansell

Mailing Address 19641 E. Charline Place

City	State	Zip Code
Rowland Heights	CA	91748

Purpose of Disbursement
Office Expenses

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2016

Amount of Each Disbursement this Period

43.00

☐ Memo Item

Transaction ID : EXPB836

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

6643.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. DAVID L. GOULD COMPANY MERCHANT ACCOUNT

Mailing Address 249 E. Ocean Blvd., Suite 685

City	State	Zip Code
Long Beach	CA	90802

Purpose of Disbursement
Credit Card Merchant Fee & Expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		09		2016

Amount of Each Disbursement this Period

192.42

☐ Memo Item

Transaction ID : EXPB839

B. Actblue

Mailing Address 14 Arrow St.

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement
Credit Card Processing Fee

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		10		2016

Amount of Each Disbursement this Period

0.54

☐ Memo Item

Transaction ID : EXPB866

C. COPS VOTER GUIDE

Mailing Address 705-2 E. Bidwell St.,#370

City	State	Zip Code
Folsom	CA	95630

Purpose of Disbursement
Slate Mailer

004

Candidate Name

COPS VOTER GUIDECategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Transaction ID : EXPB842

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

2692.96

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 PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Brandon Stansell

Mailing Address 19641 E. Charline Place

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

City	State	Zip Code
Rowland Heights	CA	91748

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
Office Expenses

001

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB841

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. California Bank & Trust

Mailing Address 550 S. Hope Street Ste. 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2016

City	State	Zip Code
Los Angeles	CA	90071

Amount of Each Disbursement this Period

578.35

Purpose of Disbursement
Credit Card Payment

001

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB851

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)

C. California Bank & Trust

Mailing Address 550 S. Hope Street Ste. 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2016

City	State	Zip Code
Los Angeles	CA	90071

Amount of Each Disbursement this Period

1284.56

Purpose of Disbursement
Credit Card Payment

001

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB849

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:

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

1912.91

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. 1255 Extra Space Storage

Mailing Address 157 E. Stanley Street

City	State	Zip Code
Compton	CA	90220

Purpose of Disbursement
Storage Space

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2016

Amount of Each Disbursement this Period

332.15

☒ Memo Item

Transaction ID : PDTB15EXPB849

B. 1255 Extra Space Storage

Mailing Address 157 E. Stanley Street

City	State	Zip Code
Compton	CA	90220

Purpose of Disbursement
Storage Space

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2016

Amount of Each Disbursement this Period

236.00

☒ Memo Item

Transaction ID : PDTB16EXPB849

C. Automatic Printing Company

Mailing Address 1621 Cabrillo Ave.

City	State	Zip Code
Torrance	CA	90501

Purpose of Disbursement
Printing Letterhead and Envelopes

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2016

Amount of Each Disbursement this Period

987.54

☐ Memo Item

Transaction ID : EXPB864

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

987.54

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 PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. KAUFMAN LEGAL GROUP

Mailing Address 777 S. Figueroa St., Ste.4050

City	State	Zip Code
Los Angeles	CA	90017

Purpose of Disbursement
Legal Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2016

Amount of Each Disbursement this Period

2080.20

☐ Memo Item

Transaction ID : EXPB858

B. KAUFMAN LEGAL GROUP

Mailing Address 777 S. Figueroa St., Ste.4050

City	State	Zip Code
Los Angeles	CA	90017

Purpose of Disbursement
Legal Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2016

Amount of Each Disbursement this Period

1849.50

☐ Memo Item

Transaction ID : EXPB860

C. KAUFMAN LEGAL GROUP

Mailing Address 777 S. Figueroa St., Ste.4050

City	State	Zip Code
Los Angeles	CA	90017

Purpose of Disbursement
Legal Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2016

Amount of Each Disbursement this Period

85.00

☐ Memo Item

Transaction ID : EXPB862

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

4014.70

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 PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		17		2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

7.98

Purpose of Disbursement
Credit Card Processing Fee

003

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB880

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Angerholzer Broz Consulting LLC

Mailing Address 499 S. Capitol Street SW Ste.422

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

City	State	Zip Code
Washington	DC	20003

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
Fundraiser Management Expenses

003

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB872

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Angerholzer Broz Consulting LLC

Mailing Address 499 S. Capitol Street SW Ste.422

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

City	State	Zip Code
Washington	DC	20003

Amount of Each Disbursement this Period

502.67

Purpose of Disbursement
Fundraiser Management Expenses

003

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB873

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

3510.65

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Automatic Printing Company

Mailing Address 1621 Cabrillo Ave.

City	State	Zip Code
Torrance	CA	90501

Purpose of Disbursement
Business Cards

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

92.65

☐ Memo Item

Transaction ID : EXPB876

B. Shallman Communications

Mailing Address 16060 Ventura Blvd., #110

City	State	Zip Code
Encino	CA	91436

Purpose of Disbursement
Campaign Management Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Transaction ID : EXPB871

c. San Jose Marriott

Mailing Address 301 South Market St.

City	State	Zip Code
San Jose	CA	95113

Purpose of Disbursement
Appreciation Breakfast California Democratic Convention

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2016

Amount of Each Disbursement this Period

1492.94

☐ Memo Item

Transaction ID : EXPB878

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

11585.59

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Brandon Stansell

Mailing Address 19641 E. Charline Place

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2016

City	State	Zip Code
Rowland Heights	CA	91748

Amount of Each Disbursement this Period

66.60

Purpose of Disbursement
Office Expenses

001

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB877

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

40.36

Purpose of Disbursement
Credit Card Processing Fee

003

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB885

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Heather Hutt

Mailing Address 3848 S. Sycamore Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

City	State	Zip Code
Los Angeles	CA	90008

Amount of Each Disbursement this Period

723.48

Purpose of Disbursement
Campaign Expenses

001

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB881

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

830.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. The Hutt Group

Mailing Address 3848 Sycamore Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

City	State	Zip Code
Los Angeles	CA	90008

Amount of Each Disbursement this Period

241.67

Purpose of Disbursement
Office Expenses

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

☐ Memo Item

Transaction ID : EXPB882

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address P.O. Box 5025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2016

City	State	Zip Code
Carol Stream	IL	60197

Amount of Each Disbursement this Period

326.99

Purpose of Disbursement
Phone Service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

☐ Memo Item

Transaction ID : EXPB883

Full Name (Last, First, Middle Initial)

C. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

23.92

Purpose of Disbursement
Credit Card Procesing Fee

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

☐ Memo Item

Transaction ID : EXPB897

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

592.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Box 0001

City	State	Zip Code
Los Angeles	CA	90096

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2016

Amount of Each Disbursement this Period

2134.36

☐ Memo Item

Transaction ID : EXPB886

B. Regus

Mailing Address 222 West 6th Street Ste. 400

City	State	Zip Code
San Pedro	CA	90731

Purpose of Disbursement
Rent/Lease

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2016

Amount of Each Disbursement this Period

1176.84

☒ Memo Item

Transaction ID : EDTB42EXPB886

c. Regus

Mailing Address 222 West 6th Street Ste. 400

City	State	Zip Code
San Pedro	CA	90731

Purpose of Disbursement
Rent/Lease

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2016

Amount of Each Disbursement this Period

957.52

☒ Memo Item

Transaction ID : EDTB43EXPB886

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

2134.36

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 PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. LANDSLIDE COMMUNICATIONS, INC.

Mailing Address 30011 Ivy Glenn Drive, Suite 223

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

City	State	Zip Code
Laguna Niguel	CA	92677

Amount of Each Disbursement this Period

2902.00

Purpose of Disbursement
Slate Mailer

004

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB892

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. Mad Mac Foundation

Mailing Address 2023 N. Long Beach Blvd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

City	State	Zip Code
Compton	CA	90221

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Printing

004

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB888

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)

C. Austin/Egoscue Development

Mailing Address 4225 Myrtle Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

City	State	Zip Code
Long Beach	CA	90807

Amount of Each Disbursement this Period

6000.00

Purpose of Disbursement
Fundraiser Management Fee

003

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : EXPB890

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:

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

11402.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Brandon Stansell

Mailing Address 19641 E. Charline Place

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

City	State	Zip Code
Rowland Heights	CA	91748

Amount of Each Disbursement this Period

36.99

Purpose of Disbursement
Office Expenses

001

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Transaction ID : EXPB891

Full Name (Last, First, Middle Initial)

B. California Bank & Trust

Mailing Address 550 S. Hope Street Ste. 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2016

City	State	Zip Code
Los Angeles	CA	90071

Amount of Each Disbursement this Period

1684.13

Purpose of Disbursement
Credit Card Payment

001

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Transaction ID : EXPB894

Full Name (Last, First, Middle Initial)

c. 1255 Extra Space Storage

Mailing Address 157 E. Stanley Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2016

City	State	Zip Code
Compton	CA	90220

Amount of Each Disbursement this Period

332.15

Purpose of Disbursement
Storage Space

001

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Transaction ID : EDTB44EXPB894

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

1721.12

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. 1255 Extra Space Storage

Mailing Address 157 E. Stanley Street

City	State	Zip Code
Compton	CA	90220

Purpose of Disbursement
Storage Space

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2016

Amount of Each Disbursement this Period

250.00

☒ Memo Item

Transaction ID : EDTB45EXPB894

B. 1255 Extra Space Storage

Mailing Address 157 E. Stanley Street

City	State	Zip Code
Compton	CA	90220

Purpose of Disbursement
Storage Space

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2016

Amount of Each Disbursement this Period

250.00

☒ Memo Item

Transaction ID : EDTB46EXPB894

c. 1255 Extra Space Storage

Mailing Address 157 E. Stanley Street

City	State	Zip Code
Compton	CA	90220

Purpose of Disbursement
Storage Space

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2016

Amount of Each Disbursement this Period

332.15

☒ Memo Item

Transaction ID : EDTB47EXPB894

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

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. California Bank & Trust

Mailing Address 550 S. Hope Street Ste. 100

City	State	Zip Code
Los Angeles	CA	90071

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2016

Amount of Each Disbursement this Period

229.54

☐ Memo Item

Transaction ID : EXPB893

B. American Express

Mailing Address Box 0001

City	State	Zip Code
Los Angeles	CA	90096

Purpose of Disbursement
Catering for Local Democratic Club Event

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2016

Amount of Each Disbursement this Period

399.30

☐ Memo Item

Transaction ID : EXPB901

C. NFDC Democratic Blub

Mailing Address P.O. Box 19672

City	State	Zip Code
Los Angeles	CA	90019

Purpose of Disbursement
Catering for Event

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2016

Amount of Each Disbursement this Period

399.30

☒ Memo Item

Transaction ID : EDTB48EXPB901

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

628.84

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 PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. CALIFORNIANS REPRESENTED VOTER GUIDE

Mailing Address 15315 Magnolia Blvd., #118

City	State	Zip Code
Sherman Oaks	CA	91403

Purpose of Disbursement
Slate Mailer

004

Candidate Name

CALIFORNIANS REPRESENTED VOTER GUIDECategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2016

Amount of Each Disbursement this Period

2119.28

☐ Memo Item

Transaction ID : EXPB900

B. Gould & Orellana LLC

Mailing Address 249 E. Ocean Blvd., #685

City	State	Zip Code
Long Beach	CA	90802

Purpose of Disbursement
PAC Management/Political Reporting Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2016

Amount of Each Disbursement this Period

3791.25

☐ Memo Item

Transaction ID : EXPB902

c. Gould & Orellana LLC

Mailing Address 249 E. Ocean Blvd., #685

City	State	Zip Code
Long Beach	CA	90802

Purpose of Disbursement
Office Expenses

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2016

Amount of Each Disbursement this Period

213.68

☐ Memo Item

Transaction ID : EXPB903

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

6124.21

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

2.31

Purpose of Disbursement
Credit Card Processing Fee

003

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB908

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. Shallman Communications

Mailing Address 16060 Ventura Blvd., #110

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

City	State	Zip Code
Encino	CA	91436

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Campaign Management Services

001

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB904

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)

C. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

1.89

Purpose of Disbursement
Credit Card Procesing Fee

003

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB916

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:

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

5004.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Box 0001

City	State	Zip Code
Los Angeles	CA	90096

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2016

Amount of Each Disbursement this Period

3837.38

☐ Memo Item

Transaction ID : EXPB909

B. Standard Hotel

Mailing Address 550 South Flower Street

City	State	Zip Code
Los Angeles	CA	90071

Purpose of Disbursement
Meeting Expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2016

Amount of Each Disbursement this Period

241.38

☒ Memo Item

Transaction ID : EDTB49EXPB909

C. Marc Thomas Kallweit Photographer

Mailing Address 2421 17th Street Unit #203

City	State	Zip Code
Sacramento	CA	95818

Purpose of Disbursement
Purchase of Pictures

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2016

Amount of Each Disbursement this Period

425.00

☒ Memo Item

Transaction ID : EDTB50EXPB909

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

3837.38

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 PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Terry Schanz

Mailing Address 1102 Aidan Ave.

City	State	Zip Code
Sacramento	CA	95822

Purpose of Disbursement
Office Expenses

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2016

Amount of Each Disbursement this Period

851.67

☐ Memo Item

Transaction ID : EXPB912

B. Airport Van Rental AVR

Mailing Address 5235-A W 104th Street

City	State	Zip Code
Los Angeles	CA	90045

Purpose of Disbursement
Transportation Expense

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		16		2016

Amount of Each Disbursement this Period

294.64

☒ Memo Item

Transaction ID : EDTB51EXPB912

C. No Party Preference Voter Guide

Mailing Address 5429 Madison Ave.

City	State	Zip Code
Sacramento	CA	95841

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2016

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Transaction ID : EXPB913

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

2851.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Secretary of State

Mailing Address 1500 11th Street Room 495

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2016

City	State	Zip Code
Sacramento	CA	95814

Amount of Each Disbursement this Period

1740.00

Purpose of Disbursement
Candidate Filing Fee

001

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB914

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		21		2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

1.26

Purpose of Disbursement
Credit Card Processing Fee

003

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB922

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Mad Mac Foundation

Mailing Address 2023 N. Long Beach Blvd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2016

City	State	Zip Code
Compton	CA	90221

Amount of Each Disbursement this Period

1464.00

Purpose of Disbursement
Printing of Banners

004

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB919

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

3205.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Brandon Stansell

Mailing Address 19641 E. Charline Place

City	State	Zip Code
Rowland Heights	CA	91748

Purpose of Disbursement
Office Expenses

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2016

Amount of Each Disbursement this Period

48.27

☐ Memo Item

Transaction ID : EXPB918

B. Heather Hutt

Mailing Address 3848 S. Sycamore Ave.

City	State	Zip Code
Los Angeles	CA	90008

Purpose of Disbursement
Transportation Expense to CA Democratic Convention

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2016

Amount of Each Disbursement this Period

1200.00

☐ Memo Item

Transaction ID : EXPB920

C. American Express

Mailing Address Box 0001

City	State	Zip Code
Los Angeles	CA	90096

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2016

Amount of Each Disbursement this Period

4719.59

☐ Memo Item

Transaction ID : EXPB924

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

5967.86

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address Atlanta Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2016

City	State	Zip Code
Atlanta	GA	30344

Amount of Each Disbursement this Period

1402.20

Purpose of Disbursement	002 Category/ Type
Airfare Expense Isadore Hall Sacramento-Atlanta-Washington-Mineapolis-Sacramento	
Candidate Name	

☒ Memo Item

Transaction ID : EDTB54EXPB924

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

B. Paradise Restaurant

Mailing Address 889 W 190th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2016

City	State	Zip Code
Los Angeles	CA	90248

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement	003 Category/ Type
Catering for Fundraiser Event	
Candidate Name	

☒ Memo Item

Transaction ID : EDTB52EXPB924

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address 2702 Love Field Dr.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2016

City	State	Zip Code
Dallas	TX	75235

Amount of Each Disbursement this Period

435.96

Purpose of Disbursement	002 Category/ Type
Airfare Expense	
Candidate Name	

☒ Memo Item

Transaction ID : EDTB53EXPB924

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

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

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

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. San Jose Marriott

Mailing Address 301 South Market St.

City	State	Zip Code
San Jose	CA	95113

Purpose of Disbursement
California Democratic Convention Reception

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2016

Amount of Each Disbursement this Period

1100.00

☐ Memo Item

Transaction ID : EXPB923

B. Actblue

Mailing Address 14 Arrow St.

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement
Credit Card Processing Fee

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2016

Amount of Each Disbursement this Period

0.20

☐ Memo Item

Transaction ID : EXPB944

C. AT&T

Mailing Address P.O. Box 5025

City	State	Zip Code
Carol Stream	IL	60197

Purpose of Disbursement
Phone Service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

395.73

☐ Memo Item

Transaction ID : EXPB925

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

1495.93

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. California Bank & Trust

Mailing Address 550 S. Hope Street Ste. 100

City	State	Zip Code
Los Angeles	CA	90071

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

721.89

☐ Memo Item

Transaction ID : EXPB928

B. California Bank & Trust

Mailing Address 550 S. Hope Street Ste. 100

City	State	Zip Code
Los Angeles	CA	90071

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

270.58

☐ Memo Item

Transaction ID : EXPB927

C. Verizon Wireless

Mailing Address P.O. Box 66108

City	State	Zip Code
Dallas	TX	75266

Purpose of Disbursement
Phone Service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

242.60

☒ Memo Item

Transaction ID : EDTB55EXPB927

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

992.47

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. San Jose Marriott

Mailing Address 301 South Market St.

City	State	Zip Code
San Jose	CA	95113

Purpose of Disbursement
California Democratic Convention Reception

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

1162.63

☐ Memo Item

Transaction ID : EXPB926

B. VOTER GUIDE SLATE CARDS

Mailing Address 6285 E. Spring St., #202

City	State	Zip Code
Long Beach	CA	90808

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

3900.00

☐ Memo Item

Transaction ID : EXPB930

C. VOTER NEWSLETTER

Mailing Address 15021 Ventura Blvd., #530

City	State	Zip Code
Sherman Oaks	CA	91403

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

3240.00

☐ Memo Item

Transaction ID : EXPB929

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

8302.63

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 PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Terry Schanz

Mailing Address 1102 Aidan Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2016

City	State	Zip Code
Sacramento	CA	95822

Amount of Each Disbursement this Period

2700.00

Purpose of Disbursement
Gas cards for volunteers In Kind to Hillary Clinton for President

001

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Transaction ID : EXPB932

State: District:

Full Name (Last, First, Middle Initial)

B. Terry Schanz

Mailing Address 1102 Aidan Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2016

City	State	Zip Code
Sacramento	CA	95822

Amount of Each Disbursement this Period

609.92

Purpose of Disbursement
Meeting Expenses

001

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Transaction ID : EXPB933

State: District:

Full Name (Last, First, Middle Initial)

C. Rush Street

Mailing Address 9546 Washington Blvd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2016

City	State	Zip Code
Culver City	CA	90232

Amount of Each Disbursement this Period

229.35

Purpose of Disbursement
Meeting Expense

001

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Transaction ID : EDTB57EXPB933

State: District:

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

3309.92

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Terry Schanz

Mailing Address 1102 Aidan Ave.

City	State	Zip Code
Sacramento	CA	95822

Purpose of Disbursement
Meeting Expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2016

Amount of Each Disbursement this Period

485.29

☐ Memo Item

Transaction ID : EXPB931

B. Aioli Bodega Espanola

Mailing Address 1800 L Street

City	State	Zip Code
Sacramento	CA	95874

Purpose of Disbursement
Meeting Expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2016

Amount of Each Disbursement this Period

396.79

☒ Memo Item

Transaction ID : EDTB56EXPB931

c. Budget Watchdogs Newsletter

Mailing Address 1954 W. Carson St., Ste.B

City	State	Zip Code
Torrance	CA	90501

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

2043.00

☐ Memo Item

Transaction ID : EXPB935

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

2528.29

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 PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. California Senior Advocates League Voter Guide

Mailing Address 1954 W. Carson St., Ste.B

City	State	Zip Code
Torrance	CA	90501

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

3012.00

☐ Memo Item

Transaction ID : EXPB937

Full Name (Last, First, Middle Initial)

B. California Voter Guide

Mailing Address 1954 W. Carson St., Ste.B

City	State	Zip Code
Torrance	CA	90501

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

682.00

☐ Memo Item

Transaction ID : EXPB936

Full Name (Last, First, Middle Initial)

c. Election Digest

Mailing Address 1954 W. Carson St., Ste.B

City	State	Zip Code
Torrance	CA	90501

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Election DigestCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

2463.00

☐ Memo Item

Transaction ID : EXPB938

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

6157.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. California Latino Voters' Guide

Mailing Address 930 Colorado Blvd. Bldg 2

City	State	Zip Code
Los Angeles	CA	90041

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

2438.00

☐ Memo Item

Transaction ID : EXPB942

B. Conga Room Live, LLC

Mailing Address 800 West Olympic Blvd.

City	State	Zip Code
Los Angeles	CA	90015

Purpose of Disbursement
Fundraiser Management Fee for Event

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

6284.25

☐ Memo Item

Transaction ID : EXPB939

C. Gould & Orellana LLC

Mailing Address 249 E. Ocean Blvd., #685

City	State	Zip Code
Long Beach	CA	90802

Purpose of Disbursement
Office Expenses

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2016

Amount of Each Disbursement this Period

173.30

☐ Memo Item

Transaction ID : EXPB946

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

8895.55

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 PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Gould & Orellana LLC

Mailing Address 249 E. Ocean Blvd., #685

City	State	Zip Code
Long Beach	CA	90802

Purpose of Disbursement
PAC Management/Political Reporting Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2016

Amount of Each Disbursement this Period

2537.50

☐ Memo Item

Transaction ID : EXPB945

B. The Hutt Group

Mailing Address 3848 Sycamore Ave.

City	State	Zip Code
Los Angeles	CA	90008

Purpose of Disbursement
Ballot Statement Fee

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2016

Amount of Each Disbursement this Period

9400.00

☐ Memo Item

Transaction ID : EXPB961

c. Registrar Recorder County Clerk

Mailing Address 12400 Imperial Highway

City	State	Zip Code
Norwalk	CA	90650

Purpose of Disbursement
Ballot Statement Fee

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2016

Amount of Each Disbursement this Period

9400.00

☒ Memo Item

Transaction ID : EDTB58EXPB961

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

11937.50

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. The Hutt Group

Mailing Address 3848 Sycamore Ave.

Date of Disbursement

M M	D D	Y Y Y Y
03	04	2016

City	State	Zip Code
Los Angeles	CA	90008

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Fundraiser Management Fee

003

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB959

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	D D	Y Y Y Y
03	06	2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

3.42

Purpose of Disbursement
Credit Card Processing Fee

003

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB967

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Millennials For Effective Government

Mailing Address 249 E. Ocean Blvd. Ste. 685

Date of Disbursement

M M	D D	Y Y Y Y
03	07	2016

City	State	Zip Code
Long Beach	CA	90802

Amount of Each Disbursement this Period

4163.70

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB963

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

9167.12

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

62.68

Purpose of Disbursement
Credit Card Procesing Fee

003

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB975

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. CALIFORNIANS VOTE GREEN

Mailing Address 249 E. Ocean Blvd., #685

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2016

City	State	Zip Code
Long Beach	CA	90802

Amount of Each Disbursement this Period

3200.00

Purpose of Disbursement
Slate Mailer

004

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB969

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Political Data Inc.

Mailing Address P.O. Box 59570

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2016

City	State	Zip Code
Norwalk	CA	90652

Amount of Each Disbursement this Period

84.76

Purpose of Disbursement
Data Files

004

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : EXPB968

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

3347.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. KAUFMAN LEGAL GROUP

Mailing Address 777 S. Figueroa St., Ste.4050

City	State	Zip Code
Los Angeles	CA	90017

Purpose of Disbursement
Legal Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

85.00

☐ Memo Item

Transaction ID : EXPB971

B. Robert Brandin

Mailing Address 2187 Grenadier Drive

City	State	Zip Code
San Pedro	CA	90732

Purpose of Disbursement
Phone Bank Services

005

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2016

Amount of Each Disbursement this Period

1170.00

☐ Memo Item

Transaction ID : EXPB973

C. DAVID L. GOULD COMPANY MERCHANT ACCOUNT

Mailing Address 249 E. Ocean Blvd., Suite 685

City	State	Zip Code
Long Beach	CA	90802

Purpose of Disbursement
Credit Card Merchant Fee & Expenses

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2016

Amount of Each Disbursement this Period

78.96

☐ Memo Item

Transaction ID : EXPB976

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

1333.96

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	D D	Y Y Y Y
03	20	2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

Purpose of Disbursement
Credit Card Procesing Fee

003

9627.28

Candidate Name

☐ Memo Item

Transaction ID : EXPB982

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Full Name (Last, First, Middle Initial)

B. My Campaign Store, LLC

Mailing Address 304 Whittington Pkwy, #201

Date of Disbursement

M M	D D	Y Y Y Y
03	21	2016

City	State	Zip Code
Louisville	KY	40222

Amount of Each Disbursement this Period

Purpose of Disbursement
Lawn Signs

004

6126.78

Candidate Name

☐ Memo Item

Transaction ID : EXPB977

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

Full Name (Last, First, Middle Initial)

c. Bernard Dory

Mailing Address 4420 6th Ave.

Date of Disbursement

M M	D D	Y Y Y Y
03	22	2016

City	State	Zip Code
Los Angeles	CA	90043

Amount of Each Disbursement this Period

Purpose of Disbursement
Field Operation Consulting Services

004

3500.00

Candidate Name

☐ Memo Item

Transaction ID : EXPB979

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Other (specify)		

State: District:

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

9627.28

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 82 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Box 0001

City	State	Zip Code
Los Angeles	CA	90096

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

5012.07

☐ Memo Item

Transaction ID : EXPB980

B. Extended Stay America

Mailing Address 1560 N 1st Street

City	State	Zip Code
San Jose	CA	95112

Purpose of Disbursement
Lodging Staff Democratic Convention

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

295.20

☒ Memo Item

Transaction ID : EDTB64EXPB980

c. Extended Stay America

Mailing Address 1560 N 1st Street

City	State	Zip Code
San Jose	CA	95112

Purpose of Disbursement
Lodging Staff Democratic Convention

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

295.20

☒ Memo Item

Transaction ID : EDTB61EXPB980

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

5012.07

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 PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Extended Stay America

Mailing Address 1560 N 1st Street

City	State	Zip Code
San Jose	CA	95112

Purpose of Disbursement
Lodging Staff Democratic Convention

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

295.20

☒ Memo Item

Transaction ID : EDTB62EXPB980

B. Extended Stay America

Mailing Address 1560 N 1st Street

City	State	Zip Code
San Jose	CA	95112

Purpose of Disbursement
Lodging Staff Democratic Convention

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

295.20

☒ Memo Item

Transaction ID : EDTB63EXPB980

c. Regus

Mailing Address 222 West 6th Street Ste. 400

City	State	Zip Code
San Pedro	CA	90731

Purpose of Disbursement
Rent/Lease

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

1224.22

☒ Memo Item

Transaction ID : EDTB65EXPB980

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 PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. The Fairmont Hotel

Mailing Address 1703 S. Market Street

City	State	Zip Code
San Jose	CA	95113

Purpose of Disbursement
Lodging Democratic Convention

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

819.37

☒ Memo Item

Transaction ID : EDTB60EXPB980

B. The Fairmont Hotel

Mailing Address 1703 S. Market Street

City	State	Zip Code
San Jose	CA	95113

Purpose of Disbursement
Lodging Democratic Convention

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

807.30

☒ Memo Item

Transaction ID : EDTB59EXPB980

c. Campaign LA

Mailing Address 15518 S. Broadway Street

City	State	Zip Code
Gardena	CA	90248

Purpose of Disbursement
Double Face Signs

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2016

Amount of Each Disbursement this Period

1960.00

☐ Memo Item

Transaction ID : EXPB983

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

1960.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 85 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. California Bank & Trust

Mailing Address 550 S. Hope Street Ste. 100

City	State	Zip Code
Los Angeles	CA	90071

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

Amount of Each Disbursement this Period

1542.43

☐ Memo Item

Transaction ID : EXPB987

B. 1255 Extra Space Storage

Mailing Address 157 E. Stanley Street

City	State	Zip Code
Compton	CA	90220

Purpose of Disbursement
Storage Space

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

Amount of Each Disbursement this Period

332.15

☒ Memo Item

Transaction ID : EDTB72EXPB987

c. 1255 Extra Space Storage

Mailing Address 157 E. Stanley Street

City	State	Zip Code
Compton	CA	90220

Purpose of Disbursement
Storage Space

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

Amount of Each Disbursement this Period

250.00

☒ Memo Item

Transaction ID : EDTB73EXPB987

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

1542.43

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 86 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. California Bank & Trust

Mailing Address 550 S. Hope Street Ste. 100

City	State	Zip Code
Los Angeles	CA	90071

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

Amount of Each Disbursement this Period

4158.53

☐ Memo Item

Transaction ID : EXPB986

B. Southwest Airlines

Mailing Address 2702 Love Field Dr.

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement
Airfare Expense

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

Amount of Each Disbursement this Period

457.96

☒ Memo Item

Transaction ID : EDTB66EXPB986

C. Oakland Marriott

Mailing Address 1001 Broadway

City	State	Zip Code
Oakland	CA	94607

Purpose of Disbursement
Lodging

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

Amount of Each Disbursement this Period

239.35

☒ Memo Item

Transaction ID : EDTB67EXPB986

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

4158.53

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

City	State	Zip Code
Fort Worth	TX	76155

Amount of Each Disbursement this Period

Purpose of Disbursement
Airfare Expense

002

769.70

Candidate Name

☒ Memo Item

Transaction ID : EDTB68EXPB986

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. Verizon Wireless

Mailing Address P.O. Box 66108

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

City	State	Zip Code
Dallas	TX	75266

Amount of Each Disbursement this Period

Purpose of Disbursement
Phone Bill

001

439.87

Candidate Name

☒ Memo Item

Transaction ID : EDTB69EXPB986

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)

C. Estancia Hotel

Mailing Address 9700 N Torrey Pines Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

City	State	Zip Code
La Jolla	CA	92037

Amount of Each Disbursement this Period

Purpose of Disbursement
Lodging

002

655.06

Candidate Name

☒ Memo Item

Transaction ID : EDTB70EXPB986

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:

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

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 88 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Airbnb Inc.

Mailing Address 888 Brannan Street

City	State	Zip Code
San Francisco	CA	94103

Purpose of Disbursement
Lodging

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

Amount of Each Disbursement this Period

558.00

☒ Memo Item

Transaction ID : EDTB71EXPB986

B. Actblue

Mailing Address 14 Arrow St.

City	State	Zip Code
Cambridge	MA	02138

Purpose of Disbursement
Credit Card Procesing Fee

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		27		2016

Amount of Each Disbursement this Period

59.25

☐ Memo Item

Transaction ID : EXPB1031

C. AT&T

Mailing Address P.O. Box 5025

City	State	Zip Code
Carol Stream	IL	60197

Purpose of Disbursement
Phone Services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2016

Amount of Each Disbursement this Period

369.88

☐ Memo Item

Transaction ID : EXPB1007

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

429.13

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 PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. San Francisco Bar Pilots Political Action Committee

Mailing Address Pier 9 East End

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2016

City	State	Zip Code
San Francisco	CA	94111

Amount of Each Disbursement this Period

Purpose of Disbursement
Fundraiser Event

367.50

Candidate Name

San Francisco Bar Pilots Political Action CommitteeCategory/
Type☐ Memo Item**Transaction ID : NONB1117**

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Actblue

Mailing Address 14 Arrow St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2016

City	State	Zip Code
Cambridge	MA	02138

Amount of Each Disbursement this Period

Purpose of Disbursement
Credit Card Processing Fee

209.35

Candidate Name

Category/
Type☐ Memo Item**Transaction ID : EXPB1068**

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/
Type☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

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

576.85

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

176170.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 100

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

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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

Full Name (Last, First, Middle Initial)

A. Kyle John Gehring

Mailing Address 12438 Coconut Row Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2016

City	State	Zip Code
Palm Beach Gardens	FL	33410

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Refund of Contribution

010

Candidate Name

Category/
Type☐ Memo Item**Transaction ID : EXPB906**

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.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type☐ Memo Item

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type☐ Memo Item

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

500.00

500.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 91 OF 100

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

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

American Express

Nature of Debt (Purpose):

Credit Card Payment

Mailing Address Box 0001

City State

Zip Code

Los Angeles

CA

90096

Outstanding Balance Beginning This Period

2903.02

Transaction ID : PAYD799

Amount Incurred This Period

0.00

Payment This Period

2903.02

Outstanding Balance at Close of This Period

0.00

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

American Express

Nature of Debt (Purpose):

Credit Card Payment

Mailing Address Box 0001

City State

Zip Code

Los Angeles

CA

90096

Outstanding Balance Beginning This Period

4447.81

Transaction ID : PAYD800

Amount Incurred This Period

0.00

Payment This Period

4447.81

Outstanding Balance at Close of This Period

0.00

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

Angerholzer Broz Consulting LLC

Nature of Debt (Purpose):

Fundraiser Managemnet Fee

Mailing Address 499 S. Capitol Street SW Ste.422

City

State

Zip Code

Washington

DC

20003

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD874

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional) ▶2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 92 OF 100

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

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

Angerholzer Broz Consulting LLC

Nature of Debt (Purpose):

Fundraiser Management Expenses

Mailing Address 499 S. Capitol Street SW Ste.422

City State

Zip Code

Washington

DC

20003

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD875

Amount Incurred This Period

1950.83

Payment This Period

0.00

Outstanding Balance at Close of This Period

1950.83

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

Angerholzer Broz Consulting LLC

Nature of Debt (Purpose):

Fundraiser Management Fee

Mailing Address 499 S. Capitol Street SW Ste.422

City State

Zip Code

Washington

DC

20003

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1014

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

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

Angerholzer Broz Consulting LLC

Nature of Debt (Purpose):

Fundraiser Expenses

Mailing Address 499 S. Capitol Street SW Ste.422

City

State

Zip Code

Washington

DC

20003

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1015

Amount Incurred This Period

35.27

Payment This Period

0.00

Outstanding Balance at Close of This Period

35.27

1) **SUBTOTALS** This Period This Page (optional) ▶

4986.10

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
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☒ 10

NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

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

Austin/Egoscue Development

Nature of Debt (Purpose):

Fundraiser Management Fee

Mailing Address 4225 Myrtle Ave.

City State

Zip Code

Long Beach

CA

90807

Outstanding Balance Beginning This Period

6000.00

Transaction ID : PAYD807

Amount Incurred This Period

0.00

Payment This Period

6000.00

Outstanding Balance at Close of This Period

0.00

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

Austin/Egoscue Development

Nature of Debt (Purpose):

Fundraiser Management Fee

Mailing Address 4225 Myrtle Ave.

City State

Zip Code

Long Beach

CA

90807

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD934

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

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

Austin/Egoscue Development

Nature of Debt (Purpose):

Fundraiser Management Fee

Mailing Address 4225 Myrtle Ave.

City

State

Zip Code

Long Beach

CA

90807

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1056

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

1) **SUBTOTALS** This Period This Page (optional) ▶

12000.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

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

Austin/Egoscue Development

Nature of Debt (Purpose):

Fundraiser Management Fee

Mailing Address 4225 Myrtle Ave.

City State

Zip Code

Long Beach

CA

90807

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1069

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

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

California Bank & Trust

Nature of Debt (Purpose):

Credit Card Payment

Mailing Address 550 S. Hope Street Ste. 100

City State

Zip Code

Los Angeles

CA

90071

Outstanding Balance Beginning This Period

1284.56

Transaction ID : PAYD847

Amount Incurred This Period

0.00

Payment This Period

1284.56

Outstanding Balance at Close of This Period

0.00

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

California Bank & Trust

Nature of Debt (Purpose):

Credit Card Payment

Mailing Address 550 S. Hope Street Ste. 100

City

State

Zip Code

Los Angeles

CA

90071

Outstanding Balance Beginning This Period

578.35

Transaction ID : PAYD848

Amount Incurred This Period

0.00

Payment This Period

578.35

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

6000.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

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

Campaign LA

Nature of Debt (Purpose):

Color Signs

Mailing Address 15518 S. Broadway Street

City State

Zip Code

Gardena

CA

90248

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD990

Amount Incurred This Period

960.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

960.00

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

COPS VOTER GUIDE

Nature of Debt (Purpose):

Slate Mailer

Mailing Address 705-2 E. Bidwell St.,#370

City State

Zip Code

Folsom

CA

95630

Outstanding Balance Beginning This Period

5000.00

Transaction ID : PAYD648

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

2500.00

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

DAVID L. GOULD COMPANY MERCHANT ACCOUNT

Nature of Debt (Purpose):

Credit Card Merchant Fee & Expenses

Mailing Address 249 E. Ocean Blvd., Suite 685

City

State

Zip Code

Long Beach

CA

90802

Outstanding Balance Beginning This Period

192.42

Transaction ID : PAYD838

Amount Incurred This Period

0.00

Payment This Period

192.42

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

3460.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

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

Gravis MarketingNature of Debt (Purpose):
Phone Calling

Mailing Address 910 Belle Ave. Ste. 1180

City State

Zip Code

Winter Springs

FL

32708

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1062

Amount Incurred This Period

7000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7000.00

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

KAUFMAN LEGAL GROUPNature of Debt (Purpose):
Legal Services

Mailing Address 777 S. Figueroa St., Ste.4050

City State

Zip Code

Los Angeles

CA

90017

Outstanding Balance Beginning This Period

2080.20

Transaction ID : PAYD855

Amount Incurred This Period

0.00

Payment This Period

2080.20

Outstanding Balance at Close of This Period

0.00

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

KAUFMAN LEGAL GROUPNature of Debt (Purpose):
Legal Services

Mailing Address 777 S. Figueroa St., Ste.4050

City

State

Zip Code

Los Angeles

CA

90017

Outstanding Balance Beginning This Period

1849.50

Transaction ID : PAYD856

Amount Incurred This Period

0.00

Payment This Period

1849.50

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

7000.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

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

KAUFMAN LEGAL GROUP

Nature of Debt (Purpose):

Legal Services

Mailing Address 777 S. Figueroa St., Ste.4050

City State

Zip Code

Los Angeles

CA

90017

Outstanding Balance Beginning This Period

85.00

Transaction ID : PAYD857

Amount Incurred This Period

0.00

Payment This Period

85.00

Outstanding Balance at Close of This Period

0.00

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

Mad Mac Foundation

Nature of Debt (Purpose):

Printing

Mailing Address 2023 N. Long Beach Blvd.

City State

Zip Code

Compton

CA

90221

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD887

Amount Incurred This Period

1464.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1464.00

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

Millennials For Effective Government

Nature of Debt (Purpose):

Slate Mailer

Mailing Address 249 E. Ocean Blvd. Ste. 685

City

State

Zip Code

Long Beach

CA

90802

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD962

Amount Incurred This Period

4163.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

4163.70

1) **SUBTOTALS** This Period This Page (optional) ▶

5627.70

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

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

New Blue Interactive, LLC

Nature of Debt (Purpose):

Media Strategy Services

Mailing Address 1146 19th Street NW Ste. 750

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD940

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

Paul Pogue

Nature of Debt (Purpose):

Assembly, Placement & Removal of Signs

Mailing Address 10822 Woodward Ave.

City State

Zip Code

Sunland

CA

91040

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1089

Amount Incurred This Period

4000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

Terry Schanz

Nature of Debt (Purpose):

Fundraiser Management Expenses

Mailing Address 1102 Aidan Ave.

City

State

Zip Code

Sacramento

CA

95822

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1072

Amount Incurred This Period

1064.89

Payment This Period

0.00

Outstanding Balance at Close of This Period

1064.89

1) **SUBTOTALS** This Period This Page (optional)

7064.89

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

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

Terry Schanz

Nature of Debt (Purpose):

Meeting Expenses

Mailing Address 1102 Aidan Ave.

City State

Zip Code

Sacramento

CA

95822

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1130

Amount Incurred This Period

830.96

Payment This Period

0.00

Outstanding Balance at Close of This Period

830.96

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

Terry Schanz

Nature of Debt (Purpose):

Meeting Expenses

Mailing Address 1102 Aidan Ave.

City State

Zip Code

Sacramento

CA

95822

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1134

Amount Incurred This Period

2155.51

Payment This Period

0.00

Outstanding Balance at Close of This Period

2155.51

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

Shallman Communications

Nature of Debt (Purpose):

Campaign Management Services

Mailing Address 16060 Ventura Blvd., #110

City

State

Zip Code

Encino

CA

91436

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD965

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) **SUBTOTALS** This Period This Page (optional) ▶

7986.47

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

PAGE 100 OF 100

FOR LINE NUMBER:
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☒ 10

NAME OF COMMITTEE (In Full)

HALL FOR CONGRESS 2016

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

Shallman CommunicationsNature of Debt (Purpose):
Design

Mailing Address 16060 Ventura Blvd., #110

City State

Zip Code

Encino

CA

91436

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1017

Amount Incurred This Period

262.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

262.50

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

Siren's Java & TeaNature of Debt (Purpose):
Coffee for Event

Mailing Address 356 W 7th Street

City State

Zip Code

San Pedro

CA

90731

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD1008

Amount Incurred This Period

66.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

66.70

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

329.20

2) **TOTALS** This Period (last page this line number only) ▶

57454.36

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

57454.36