

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Herbalife International Inc. PAC**

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

**A. Bogard, Robert, D, ,**

Mailing Address 950 West 190th Street

City

Torrance

State

CA

Zip Code

90502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Herbalife International of America Inc

Occupation (for Individual)

Sr. Director NAM Regional Sales & S

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.84

Date of Receipt

06 / 14 / 2019

**Transaction ID : A2019-1438357**

Amount of Each Receipt this Period

23.07

☐ Memo Item

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

**B. Bogard, Robert, D, ,**

Mailing Address 950 West 190th Street

City

Torrance

State

CA

Zip Code

90502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Herbalife International of America Inc

Occupation (for Individual)

Sr. Director NAM Regional Sales & S

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.91

Date of Receipt

06 / 28 / 2019

**Transaction ID : A2019-1438440**

Amount of Each Receipt this Period

23.07

☐ Memo Item

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

**C. Cacciatore, Jean Marie, , ,**

Mailing Address 800 W. Olympic Blvd  
Suite 406

City

Los Angeles

State

CA

Zip Code

90015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Herbalife International of America Inc

Occupation (for Individual)

Chief Human Resources Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

06 / 14 / 2019

**Transaction ID : A2019-1438359**

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

121.14