



2021-2022 BOARD OF DIRECTORS

BIANCA NEPALES GERVACIO

January 25, 2022

JESSICA CALOZA
IMMEDIATE PAST PRESIDENT

SHEKINAH DEOCARES EXECUTIVE VICE PRESIDENT

> EMMA HILARIO CONTROLLER

CHRIS LAPINIG SECRETARY

AUDREY NICOLE SORIANO VICE PRESIDENT OF COMMUNICATIONS

GRACE BARRIOS
VICE PRESIDENT OF POLICY &
POLITICAL STRATEGY

JAIME GEAGA
VICE PRESIDENT OF COMMUNITY
OUTREACH & ENGAGEMENT

VICKY PEREZ
VICE PRESIDENT OF PROGRAMS &
ENDORSEMENTS

GODFREY SANTOS PLATA
VICE PRESIDENT OF MEMBERSHIP &
FUNDRAISING

SAM SOLEMNIDAD
VICE PRESIDENT OF RISING LEADERS

JOSELYN

GEAGA-ROSENTHAL

ADVISOR & FOUNDING PRESIDENT

WWW.PALAD.ORG WEBSITE

@PILIPINODEMS
FACEBOOK

@PILIPINO.LA.DEMS INSTAGRAM

@PILIPINODEMS
TWITTER

HELLO@PALAD.ORG EMAIL FEDERAL ELECTION COMMISSION
Re: PILIPINO AMERICAN LOS ANGELES DEMOCRATS [PALAD]
REPORTS FOR JULY 1, 2021 THROGUH DECEMBER 31, 2021

Dear Sir/Madam

Enclosed are the following:

FEC FORM 3X for the periods of July 1, 2021 through September 30, 2021 and

FEC FORM 3X for the periods of October 1, 2021 through December 31, 2021.

PALAD prepares Quarterly Reports.

Thank you for your attention.

Very truly yours,

Emma Hilario,

Controller, PALAD

FEC FORM 3X

REPORT OF RECEIPTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2022 FEB -3 PM 1: 27

Office Use Only

| 1. | NAME OF COMMITTEE (in full) | TYPE OR PRINT ▼ | Example: If to over the line | | 12FE4M5 | |
|------|--|---|------------------------------|---------------------|---|--|
| PIL | IPINO AMERICAN LOS ANGE | LES DEMOCRATS | | | <u> </u> | |
| L | DRESS (number and street) | 2325 TRICI | CITY A | DRIVE, | CA 97 | 7,50[136,3] ZIP CODE ▲ |
| | C 0 0 7 5 3 9 3 9 | | 3. IS THIS REPORT | NEW (N) OR | AMENE (A) | DED |
| 4. | TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (C) Quarterly Report (C) Quarterly Report (C) Quarterly Report (C) January 31 Year-End Report (Non-election Year Only) (MY) Termination Report (TER) | (c) 12-Day PRE-Electic Report for t (d) 30-Day POST-Elect Report for t | Election on General | on (12C) | Aug 20 (I Sep 20 (I Oct 20 (N General (12G) Special (12S) | M9) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) |
| 5. | Covering Period 10 | M / D D / 2021 | throug | | | 021 |
| | ertify that I have examined the or Print Name of Treasure | 51414A (W A D) | , , | nd belief it is tru | e, correct and cor | nplete. |
| Sign | nature of Treasurer TE: Submission of false, erron | Emme G | | | ate 01 | 25 2022 analties of 52 U.S.C. § 30109 |
| L | Office Use Only | | | | | EC FORM 3X Rev. 05/2016 |

2022-02-08-03-00396764

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name PILIPINO AMERICAN LOS ANGELES DEMOCRATS 2021 Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand Type tekt here January 1, Cash on Hand at 7,531.09, Beginning of Reporting Period..... 31,536,72 (c) Total Receipts (from Line 19) 27,437.61 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 34968.7 6(a) and 6(c) for Column B) 37,884.36 Total Disbursements (from Line 31)...... 3463.16 Cash on Hand at Close of Reporting Period 31505.54 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 1050 First Street, N.E. Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

2022 02 08 05 05 00396765

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name PILIPINO AMERICAN LOS ANGELES DEMOCRATS (07.07)/ 10 12 31 2021 Report Covering the Period: To: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... 14,900.00 (ii) Unitemized 10,396.72 (iii) TOTAL (add 23,437,61 27,536.72 Lines 11(a)(i) and (ii).....▶ 1,750.00 (b) Political Party Committees 1,750.00 (c) Other Political Committees 2250.00 (such as PACs)..... 2,250.00 (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 31.536.72 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0 Party Committees..... 0 13. All Loans Received 0 0 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0 0 Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0 (from Schedule H3)..... 0 (b) Levin Funds (from Schedule H5)....... (c) Total Transfers (add 18(a) and 18(b)).. 0 19. Total Receipts (add Lines 11(d), 27,437.6,1 12, 13, 14, 15, 16, 17, and 18(c))........ 31,536.72 20. Total Federal Receipts 31,536.72 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B |
|---|--|--|
| 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | Total Tills Period | Calendar Year-to-Date |
| (i) Federal Share | 0 | |
| (ii) Non-Federal Share | 0 | 0 |
| (b) Other Federal Operating | | ال <u>د المحارث من من مع محارث من من من المحارث والمحارث والمحارث والمحارث والمحارث والمحارث والمحارث والمحارث والم</u> المتحارث المحارث والمحارث والم |
| Expenditures | 3,463,16 | 11: |
| (c) Total Operating Expenditures | [| 6,378.82 |
| (add 21(a)(i), (a)(ii), and (b))▶ | 3,463.16 | ,6,378.82 |
| 22. Transfers to Affiliated/Other Party | | |
| Committees | | |
| Federal Candidates/Committees | | |
| and Other Political Committees | | |
| 24. Independent Expenditures (use Schedule E) | | 0 |
| 25. Coordinated Party Expenditures | | <u>- (- 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. </u> |
| (52 U.S.C. § 30116(d)) (use Schedule F) | 0 | 0 |
| , | | |
| 26. Loan Repayments Made | 0 | 0 |
| | | الْ برسانية <u>(* 1 سراحي و الله المساعدة (* 1 سراحية (* 1 سراحية</u> المنظم المساعدة (* 1 سراحية |
| 27. Loans Made | 0 | |
| (a) Individuals/Persons Other | | |
| Than Political Committees | | |
| (h) Delitical Body Committees | | |
| (b) Political Party Committees(c) Other Political Committees | | |
| (c) Other Political Committees (such as PACs) | | |
| | <u>0</u> | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | | |
| (add Lines 20(a), (b), and (c)) | | |
| 29. Other Disbursements (Including | | , |
| Non-Federal Donations) | 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0 | 0 |
| | | <u> </u> |
| Federal Election Activity (52 U.S.C. § 30101 (a) Allocated Federal Election Activity (from Schedule H6) | (20)) | |
| (i) Federal Share | 10 | □ (0 |
| | | <u> </u> |
| (ii) "Levin" Share | 0 | |
| (b) Federal Election Activity Paid | | |
| Entirely With Federal Funds | 0 | |
| Lines 30(a)(i), 30(a)(ii) and 30(b)) | | |
| | <u> </u> | |
| 31. Total Disbursements (add Lines 21(c), 22, | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | | |
| | 3,463.16 | 6,378.82 |
| 32. Total Federal Disbursements | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) | | |
| from Line 31) | 3,463.16 | 6.378.82 |
| | | 6-2-3-3-47 |

DETAILED SUMMARY PAGE

of Disbursements FEC Form 3X (Rev. 05/2016) Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures 3,463.16

| SCHEDULE A | (FEC | Form | 3X) |
|--------------|-------|------|-----|
| ITEMIZED REC | EIPTS | ; | |

| POLICINE A PEO FAIRE AND | | , , , , , , , , , , , , , , , , , , , | | | |
|--|--|---|--|--|--|
| SCHEDULE A (FEC Form 3X) | Use separate schedule(s) | FOR LINE NUMBER: PAGE OF (check only one) | | | |
| TEMIZED RECEIPTS | for each category of the | | | | |
| | Detailed Summary Page | 13 14 15 16 17 | | | |
| Any information copied from such Reports and Statement or for commercial purposes, other than using the name a | | | | | |
| NAME OF COMMITTEE (In Full) | | | | | |
| PILIPINO AMERICAN LOS ANGELES DEN | MOCRATS | | | | |
| Full Name of Individual (Last, First, Middle Initial) or F | ull Organization Name | Date of Receipt | | | |
| - HILLS HOME CARE SERVIES Mailing Address | Date of necessity | | | | |
| | | 10 30 2021 | | | |
| City State VAN NUYS CA | e Zip Code | | | | |
| FEC ID number of contributing | | Amount of Each Receipt this Period | | | |
| federal political committee. | | ,,250.00 | | | |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item | | | |
| Receipt For: Aggre | gate Year-to-Date ▼ | 7 | | | |
| Primary X General Other (specify) ▼ | 250.00 | i | | | |
| Other (specify) | (), 250.00 (), 10.00 (), 1 | <u> </u> | | | |
| Full Name of Individual (Last, First, Middle Initial) or F JOSELYN GEAGA-ROSENTHAL | ull Organization Name | Date of Receipt | | | |
| Mailing Address 146 N CORONADO STREET | 10 30 2021 | | | | |
| City State LOS ANGELES CA | e Zip Code 90026 | | | | |
| | 30020 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | | 1000.00 | | | |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item | | | |
| Receipt For: Agore | gate Year-to-Date ▼ | - - | | | |
| Primary General | | | | | |
| Other (specify) ▼ | 2000.00, A A | 1 , | | | |
| Full Name of Individual (Last, First, Middle Initial) or F JAIME GEAGA | ull Organization Name | Date of Receipt | | | |
| Mailing Address 1005 1/2 SANBORN AVENUE | | | | | |
| City State CA | | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | | 1000.00 | | | |
| Name of Employer (for Individual) | Occupation (for Individual) RETIRED | Memo Item | | | |
| Primary X General | gate Year-to-Date ▼ | | | | |
| SUBTOTAL of Receipts This Page (optional) | • | , | | | |
| ······································ | | | | | |

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

| SCHEDUL | EΑ | (FEC | Form | 3X) |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE OF | | |
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| | y information copied from such Reports and Statements m for commercial purposes, other than using the name and | | | | |
| | NAME OF COMMITTEE (In Full) LIPINO AMERICAN LOS ANGELES DEMO | | | | |
| | Full Name of Individual (Last, First, Middle Initial) or Full (| | | | |
| A. | ALLESANDRE, BERNARDITA | · · · · · | Date of Receipt | | |
| | Mailing Address City State | Zip Code | 10 30 2021 | | |
| | LÓS ANGELES CA | | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | | 1,000.00 | | |
| | CARE AGENCY SE | cupation (for Individual) ELF EMPLOYED | Memo Item . | | |
| | Receipt For: Primary X General Other (specify) ▼ Aggregate | Year-to-Date ▼ | | | |
| — В. | Full Name of Individual (Last, First, Middle Initial) or Full (DY, CFLIA AND GEORGE | Organization Name | Date of Receipt | | |
| | Mailing Address 1713 APEX City State | Zip Code | 10 30 2021 | | |
| | LOS ANGELES CA | | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | | ,,300.00 | | |
| | GROCAR ENTERPRISES SE | cupation (for Individual) ELF/OWNER | Memo item | | |
| | Primary X General | Year-to-Date ▼ | | | |
| | Other (specify) ▼ | <u>∧ , , ∧ 300.00</u> \ | | | |
| С. | Full Name of Individual (Last, First, Middle Initial) or Full (NEPALES, JANET | Organization Name | Date of Receipt | | |
| | Mailing Address City State | Zip Code | 10 4 30 2021 | | |
| | LOS ANGELES CA | Zip Code | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | | , , , 3 0 0 . 0 0 | | |
| | | cupation (for Individual) EPORTER | Memo Item | | |
| | Primary X General Other (specify) Aggregate | year-to-Date ▼ | | | |
| s | UBTOTAL of Receipts This Page (optional) | | | | |
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| Any or fo | information copied from such Reports and Stator commercial purposes, other than using the n | tements ma | ay not be sold or used by any pe ddress of any political committee | rson for the purpose of soliciting contributions to solicit contributions from such committee. |
| 1 | IAME OF COMMITTEE (In Full) | | | |
| , PIL | IPINO AMERICAN LOS ANGELES | DEMOC | CRATS | |
| Б А . | ull Name of Individual (Last, First, Middle Initial FORSYTH, CARINA | Date of Receipt | | |
| _ | failing Address , 155 HONNEYWOOD | | | 10 30 2021 |
| | ity FILMORE | State CA | Zip Code | Amount of Each Receipt this Period |
| | EC ID number of contributing ederal political committee. | C | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| _! | lame of Employer (for Individual) US DISTRICT ATTY OFFICE | | upation (for Individual) ECUTIVE | Memo item |
| F1 | Receipt For: Primary X General Other (specify) ▼ | Aggregate | Year-to-Date ▼ | |
| Б. В. | ull Name of Individual (Last First Middle Initial IMMANUEL HOSPICE INC. | l) or Full O | rganization Name | Date of Receipt |
| _ | failing Address | 10 30 2021 | | |
| | ity ARCADIA | State CA | Zip Code | Amount of Each Receipt this Period |
| | EC ID number of contributing aderal political committee. | C | | ,1,000.00 |
| | lame of Employer (for Individual) | Occ | upation (for Individual) | Memo Item |
| Ē | leceipt For: Primary X General | Aggregate | Year-to-Date ▼ | |
| | Other (specify) ▼ | | <u>, 1,000.00 , </u> | |
| C | ull Name of Individual (Last, First, Middle Initial EMMA HILARIO | l) or Full O | rganization Name | Date of Receipt |
| 3 | Mailing Address 2325 TRICKLING CREEK DRIVE | I Canan | Tip Cod- | 10 30 2021 |
| | LA VERNE | State CA | Zip Code 91750 | Amount of Each Receipt this Period |
| | EC ID number of contributing aderal political committee. | С | | , , , 2 5 0 . 0 0 |
| _[| lame of Employer (for Individual) RETIRED | Occi AT | upation (for Individual) TY | Memo Item |
| F | Receipt For: Primary X General Other (specify) | Aggregate | Year-to-Date ▼ | |
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| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) | FOR LINE NUMBER: PAGE OF (check only one) | | |
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| Any information copied from such Reports and or for commercial purposes, other than using the | | person for the purpose of soliciting contributions ee to solicit contributions from such committee. | | |
| NAME OF COMMITTEE (In Full) PILIPINO AMERICAN LOS ANGELI | ES DEMOCRATS | | | |
| Full Name of Individual (Last, First, Middle In A. SORIANO, AUDRY Mailing Address | nitial) or Full Organization Name | Date of Receipt | | |
| 1621 N NAOMI City BURBANK | State Zip Code CA 92505 | Amount of Each Receipt this Period | | |
| | ومبس ومستوسي ومناوات والمشين بالمساوات الوائدان | | | |

| A. | SORIANO, AUDRY | Date of Receipt | | |
|-----------|---|--------------------|---|------------------------------------|
| | Mailing Address 1621 N NAOMI | 10 30 2021 | | |
| | City BURBANK | State CA | Zip Code | |
| | | ICA | 92505 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.00 |
| | Name of Employer (for Individual) SILICON VALLEY | | pation (for Individual) ASSOCIATE | Memo Item |
| | Receipt For: Primary X General Other (specify) ▼ | Aggregate \ | Year-to-Date ▼ |] |
| В. | Full Name of Individual (Last, First, Middle Ini HENDERSON, NICHELLE | itial) or Full Org | ganization Name | Date of Receipt |
| | Mailing Address 14782 ROXTON | | Territoria. | 10 30 2021 |
| | GARDENA | State | Zip Code 91249 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 500.00 |
| | Name of Employer (for Individual) CAL STATE U | | pation (for Individual) PLOYEE | Memo Item |
| | Receipt For: | Aggregate Y | Year-to-Date ▼ | |
| | Primary X General Other (specify) ▼ | | <u>ሳ </u> |] |
| <u>с.</u> | Full Name of Individual (Last, First, Middle Ini SHARMA, DEEPA | tial) or Full Or | ganization Name | Date of Receipt |
| | Mailing Address 1000 DEWITT #406 | 10 10 2021 | | |
| | City LAFAYETTE | State CA | Zip Code 95459 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | , , , , 2 5 0 . 0 0 |
| | Name of Employer (for Individual) BURKE & WILLIS | Occup ATT | pation (for Individual) | Memo Item |
| | Receipt For: Primary X General Other (specify) | Aggregate Y | Year-to-Date ▼ | |
| s | UBTOTAL of Receipts This Page (optional) | | • | |
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| SCHEDOLE A (FEC FOIII SA) | Use separate schedule(s) | (check only one) |
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| Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and a | | |
| NAME OF COMMITTEE (In Full) | ,, | |
| PILIPINO AMERICAN LOS ANGELES DEMOC | CRATS | • |
| Full Name of Individual (Last, First, Middle Initial) or Full O | rganization Name | Bata of Bassist |
| A. <u>BATO, LEO</u> Mailing Address | | Date of Receipt |
| 17460 DONETZ | Zin Codo | 10 30 2021 |
| City State CA | Zip Code 91344 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 1,000.00 |
| DREAM ABOUT RE | upation (for Individual) ALTOR | Memo Item |
| Receipt For: Primary X General Other (specify) ▼ Aggregate | Year-to-Date ▼ 1,,000.00. | |
| Full Name of Individual (Last, First, Middle Initial) or Full O B. DALEN, SONIA | rganization Name | Date of Receipt |
| Mailing Address 2740 38TH AVENUE | 10 30 2021 | |
| City State CA | Zip Code 94116 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 500.00 |
| B OF AMERICA MA | upation (for Individual) NAGER | Memo Item |
| Receipt For: Primary X General Aggregate | Year-to-Date ▼ | |
| Other (specify) ▼ | χ , 500.00χ | |
| Full Name of Individual (Last, First, Middle Initial) or Full OC. HERNANDEZ, SARA | rganization Name | Date of Receipt |
| Mailing Address 312 W 5TH | Ta. a : | 10 30 / 2021 |
| LOS ANGELES State CA | Zip Code 90113 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | , , , 2 5 0 . 0 0 |
| CITY OF LA ELL | upation (for Individual) ECTED OFFICIAL | Memo Item |
| Receipt For: Primary Seneral Other (specify) Aggregate | Year-to-Date ▼ | |
| SUBTOTAL of Receipts This Page (optional) | • | 7-A-1-7-A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- |
| TOTAL This Period (last page this line number only) | • | "27, 4 37.61 |

| SCHEDULE A (FEC Form 3X) | , | Use separate schedule(s) | FOR LINE NUMBER: PAGE OF | | |
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| ITEMIZED RECEIPTS | | for each category of the Detailed Summary Page | (check only one) 11a 11b 11c 12 13 14 15 16 17 | | |
| Any information copied from such Reports and or for commercial purposes, other than using | erson for the purpose of soliciting contributions | | | | |
| NAME OF COMMITTEE (In Full) | | | | | |
| PILIPINO AMERICAN LOS ANGEI | LES DEMO | CRATS | | | |
| Full Name of Individual (Last, First, Middle A. LIBAN, CHRIS | Initial) or Full C | rganization Name | Date of Receipt | | |
| Mailing Address 7932 RAMSGATE | | | 10 30 2021 | | |
| City LOS ANGELES | State CA | Zip Code 90045 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | C | | ,, 250.00 | | |
| Name of Employer (for Individual) CITY OF LA | | upation (for Individual) ECUTIVE | Memo Item | | |
| Receipt For: Primary X General Other (specify) ▼ | Aggregate | Year-to-Date ▼ | | | |
| Full Name of Individual (Last, First, Middle GIL, FACIL | Initial) or Full C | rganization Name - | Date of Receipt | | |
| Mailing Address 203268 VIA MEDICI | | | 10 30 2021 | | |
| City PORTER RANCH | State CA | Zip Code 91326 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | C | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| Name of Employer (for Individual) SELF | | upation (for Individual) TORNEY AT LAW | Memo Item | | |
| Receipt For: | Aggregate | Year-to-Date ▼ | | | |
| Primary X General Other (specify) ▼ | | <u>ሉ</u> 250.00አ | · | | |
| Full Name of Individual (Last, First, Middle C. SOLIS, GILDA | Initial) or Full C | rganization Name | Date of Receipt | | |
| Mailing Address 16633 VENTURA | | | 10 30° / 2021 | | |
| City VENTURA | State CA | Zip Code | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | C | | 1,000.00 | | |
| Name of Employer (for Individual) LA COUNTY | | upation (for Individual) ARD MEMBER | Memo Item | | |
| Receipt For: Primary X General Other (specify) | Aggregate | Year-to-Date ▼ .,, 1,000.00, | | | |
| SUBTOTAL of Receipts This Page (optional) | | | , , , , , , , , , , , , , , , , , , , | | |
| TOTAL This Period (last page this line numb | er only) | | ,, 27,437.6.1 | | |

| SCHEDUL | E A | (FEC | Form | 3X) |
|----------|-----|--------------|------|-----|
| ITEMIZED | REC | EIPTS | ; | |

| SCHEDULE A (FEC FOIII 3A) | Use separate schedule(s) | (check only one) |
|---|---|--|
| TEMIZED RECEIPTS | tor each category of the Detailed Summary Page | (check only one) 11a 11b 11c 12 13 14 15 16 17 |
| Any information copied from such Reports and Statements or for commercial purposes, other than using the name and | | |
| NAME OF COMMITTEE (In Full) | | |
| PILIPINO AMERICAN LOS ANGELES DEM | OCRATS | |
| Full Name of Individual (Last, First, Middle Initial) or Ful A. PYNOOS, KATHERINE | Organization Name | Date of Receipt |
| Mailing Address , | | لمحمدهمما المعما المممما |
| 6065 SELMA City State | Zip Code | 10 30 2021 |
| LOS ANGELES CA | 90028 | Amount of Each Receipt this Period |
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| | ccupation (for Individual) NOT EMPLOYED | Memo Item |
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| Other (specify) V | ,, <u>,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | • |
| Full Name of Individual (Last, First, Middle Initial) or Ful B. HERO III, CHRIS BAYANI | Organization Name | Date of Receipt |
| Mailing Address 5026 ROSEWOOD | | 10 30 2021 |
| City State LOS ANGELES CA | Zip Code 90004 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | ,,250.00 |
| Name of Employer (for Individual) NOT EMPLOYED | occupation (for Individual) | Memo item |
| Receipt For: Aggrega Primary X General | ite Year-to-Date ▼ | 7 |
| Other (specify) ▼ | Λ , Δ 250.00 _λ | |
| Full Name of Individual (Last, First, Middle Initial) or Ful C. VASQUEZ, DULCE | Organization Name | Date of Receipt |
| Mailing Address 738 LOS ANGELES | | 10 1 2021 |
| LOS ANGELES State CA | Zip Code 90014 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | ,,2,5,0,.00 |
| ARIZONA ŚTATE | ccupation (for Individual) DIRECTOR | Memo Item |
| Receipt For: Primary X General Other (specify) Aggrega | te Year-to-Date ▼ | · |
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| NAME OF COMMITTEE (In Full) | | |
| PILIPINO AMERICAN LOS ANGELES E | DEMOCRATS | · |
| Full Name of Individual (Last, First, Middle Initial) A. DE LEON, KEVIN | or Full Organization Name | Date of Receipt |
| Mailing Address 555 E DELANO | | 10 30 2021 |
| | State Zip Code CA 90802 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | ,,,500.00 |
| Name of Employer (for Individual) CITY OF LA | Occupation (for Individual) COUNCIL MEMBER | Memo Item, |
| Receipt For: Primary X General Other (specify) ▼ | ggregate Year-to-Date ▼ | • |
| Full Name of Individual (Last, First, Middle Initial) B. EPSTEIN, SCOTT | or Full Organization Name | Date of Receipt |
| Mailing Address 333 W SAN JOSE | State Zip Code | 10 30 2021 |
| , | State Zip Code CA 95110 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | .,, 250.00, |
| Name of Employer (for Individual) UCLA | Occupation (for Individual) CONTRACTOR | Memo Item |
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| Other (specify) ▼ | <u>∧</u> <u>∧</u> 250.00 <u>∧</u> | |
| Full Name of Individual (Last, First, Middle Initial) C. GIBSON, MIKE | or Full Organization Name | Date of Receipt |
| Mailing Address '249 E LONG BEACH | 0 | 10 m / 30° / 2021 |
| .1 | State Zip Code CA 90802 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 300.00 |
| Name of Employer (for Individual) CALIFORNIA GOVT | Occupation (for Individual) ASSEMBLY MEMBER | Memo Item |
| Receipt For: Primary X General Other (specify) | ggregate Year-to-Date ▼ | |
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| Full Name of Individual (Last, First, Middle Initial) . MEJIA, KENNETH |) or Full O | rganization Name | Date of Receipt |
| Mailing Address 1001 WILSHIRE BLVD | Ta | | 10 30 2021 |
| City LOS ANGELES | State CA | Zip Code 90017 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | ,,250.00,, |
| Name of Employer (for Individual) EVGD | | upation (for Individual) OUNTANT | Memo Item |
| Receipt For: Primary X General | Aggregate | Year-to-Date ▼ | |
| Other (specify) • | | <u> </u> | |
| Full Name of Individual (Last, First, Middle Initial) MERCADO, GRACE |) or Full O | rganization Name | Date of Receipt |
| Mailing Address 445 S FAIR OAKS AVE | To | T | 10 1 2021 |
| City PASADENA | State CA | Zip Code 91105 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | , , , , 5 0 0 0 |
| Name of Employer (for Individual) SELF | | upation (for Individual) ILLED NURSING HOME | Memo Item |
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| or for commercial purposes, other than using the | | | |
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| PILIPINO AMERICAN LOS ANGELE | | | |
| Full Name of Individual (Last, First, Middle Init A. LIM, ABRAHAM, APC | ial) or Full O | rganization Name | Date of Receipt |
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| City | State | Zip Code | 10 30 2021 |
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| federal political committee. | C . | | |
| Name of Employer (for Individual) SELF | | upation (for Individual) TORNEY AT LAW | Memo Item |
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| Full Name of Individual (Last, First, Middle Init C. GUBATAN, GERALD | ial) or Full O | rganization Name | Date of Receipt |
| Mailing Address 316 N BURLINGTON AVE. | | | 10 m / 30° / 2021 |
| City LOS ANGELES, | State CA | Zip Code 90026 | Amount of Each Receipt this Period |
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| Name of Employer (for Individual) CITY OF LOS ANGELES | Occi | upation (for Individual) DE | Memo Item |
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SCHEDULE A (FEC Form 3X)

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| PILIPINO AMERICAN LOS ANGELES DEN | OCRATS | | | | | | | | | | | |
| Full Name of Individual (Last, First, Middle Initial) or Fu | Organization Name | Т | | | | | | | | | | |
| A. HILLS HOME CARE SERVIES | | 4 | Date o | of Re | eceipt | | | | | | | |
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| Full Name of Individual (Last, First, Middle Initial) or Full JOSELYN GEAGA-ROSENTHAL | Organization Name | | Date o | of Re | eceipt | | | | | | | |
| Mailing Address 146 N CORONADO STREET | | | 10 | ' | 30 _, | / ۵ | 202 | 21 | Ÿ | | | |
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| Full Name of Individual (Last, First, Middle Initial) or Fu C. JAIME GEAGA | Organization Name | + | Date o | of Re | eceint | | | | | | | |
| Mailing Address 1005 1/2 SANBORN AVENUE | | | 10 | 7 | 90 | ট্র | 20 | å å 21 | Ϋ- | | | |
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| HOME CARE SERVICES | Zip Code Zip Code Decupation (for Individual) SELF ate Year-to-Date ▼ 1,000.00 | Date of Receipt 10 30 2021 Amount of Each Receipt this Period 1,000.00 Memo Item Date of Receipt 10 30 2021 Amount of Each Receipt this Period |
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| Α. | Full Name of Individual (Last, First, Middle Initial) of ISAAC BRYAN, CANDIDATE | or Full O | rganization Name | | D | ate o | f Re | ceipt | | | | | | | |
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| | federal political committee. | ا | | | L | | | (2 - | | | 250. | 00 <u></u> | لب | | |
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| В. | LONG BEACH YOUNG DEMS | | - | _] | D | ate o | f Re | ceipt | | | | | | | |
| | Mailing Address CA ID 1269743 | | | | ſ | м • м 10 |]′ | 30 | Ď. | 1 | 202 | 1 | ~] | | |
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| _ | Full Name of Individual (Last, First, Middle Initial) of CANDIDATE FOR SUPERVISOR | or Full O | rganization Name | \dashv | | - 4 - | | | | | | | | | |
| C. | Mailing Address | | | \dashv | υ | ate of | r He | ceipt | | | | - | er: sie | | |
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| NAME OF COMMITTEE (In Full) | and address of any pointed committee | to consider a contribution of the contribution | | | | | | | | | | |
| 〉 PILIPINO AMERICAN LOS ANGELES DI | MOCPATS | | | | | | | | | | | |
| Full Name of Individual (Last, First, Middle Initial) or | | | | | | | | | | | | |
| A. COMMUNITY COLLEGE ELECTED OFFICIAL | ruii Organization Name | Date of Receipt | | | | | | | | | | |
| Mailing Address CA ID 1438882 | | W W / 646 / 74444 | | | | | | | | | | |
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| Mailing Address CA ID 1274758 | | 10 30 2021 | | | | | | | | | | |
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| Mailing Address CA ID 1434630 | | Man / Daol / Asasasas | | | | | | | | | | |
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| Name of Employer (for Individual) | O∞ | upation (for Individual) | | ∐ Me | emo l | ltem | | | | | | | | | |
| Receipt For: Primary X General Other (specify) ▼ | Aggregate | Year-to-Date ▼ |] | | | | | | | | | | | | |
| Full Name of Individual (Last, First, Middle In | nitial) or Full O | rganization Name | -+ | | | | | | | | - | | | | |

| | 1 | | |
|---|--------------|---|------------------------------------|
| Full Name of Individual (Last, First, Middle C. SAN FRANCISCO EFORCEMEN Mailing Address CA ID 1438145 | • | anization Name | Date of Receipt |
| City | State CA | Zip Code | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | ntion (for Individual) | , 5 0 0 . 0 0 Memo Item |
| Name of Employer (for Individual) Receipt For: Primary X General Other (specify) | Aggregate Ye | arton (for Individual) ear-to-Date ▼ .,500.00 | |
| SUBTOTAL of Receipts This Page (optional | 1 | | |

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

| SCHEDULE B (FEC FOIII 3X) | Use separate schedule(s) | FOR LINE NUMBER | | | | | | | | |
|--|--|-------------------------------------|--|--|--|--|--|--|--|--|
| ITEMIZED DISBURSEMENTS | for each category of the | (check only one) 21b 22 | 23 26 27 | | | | | | | |
| | Detailed Summary Page | 28a 28b | 28c 29 30b | | | | | | | |
| | ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions references to commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | | | | | | | |
| NAME OF COMMITTEE (In Full) | | | | | | | | | | |
| PILIPINO AMERICAN LOS ANGELES DI | PILIPINO AMERICAN LOS ANGELES DEMOCRATS | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | 4 Dishaman | | | | | | | |
| A. GONZALES, TOMMY | | Date of | of Disbursement | | | | | | | |
| Mailing Address | | 12 | 8 2021 | | | | | | | |
| • | tate Zip Code | FEC I | dentification Number . | | | | | | | |
| COVINA Covered | A | | , , , , , , , , , , , , , , , , , , , | | | | | | | |
| FOOD FOR VOLUNTEERS OF FUND | RAISING EVENT | 0 0 1 | | | | | | | | |
| Candidate Name NOT APPLICABLE | | Category/ Amour | nt of Each Disbursement this Period | | | | | | | |
| Office Sought: House Disbursem | nent For: | 1,700 | 109.00 | | | | | | | |
| | Primary General . | - | a Dance V. Septem Despuis V. Septem Company Despuis L. Nove all beautiful september 1 | | | | | | | |
| President State: District: | Other (specify) ▼ | M | emo Item | | | | | | | |
| Full Name (Last, First, Middle Initial) | • | | | | | | | | | |
| B. DEOCARES, SHEKINAH | | Date o | of Disbursement | | | | | | | |
| Mailing Address | · | 12 | 08 / 2021 × × | | | | | | | |
| LÖS ANGELES, CA | | - Landa- | | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | itate Zip Code | FEC I | dentification Number | | | | | | | |
| Purpose of Disbursement | | c c | | | | | | | | |
| MAILING EXPENSES FOR FUNDRALS Candidate Name | 0 0 1 | | | | | | | | | |
| N/A | Category/ Amour Type | nt of Each Disbursement this Period | | | | | | | | |
| Office Sought: House Disbursem | | | ,, 67.31 | | | | | | | |
| <u> </u> | Primary General Other (specify) | | | | | | | | | |
| State: District: | · V-6 | | emo Item | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | (Dist. | | | | | | | |
| C. GERVACIO, BIANCA NEPALES | | , Date o | of Disbursement | | | | | | | |
| Mailing Address SUNLAND, CA | | 12 | 08 2021 | | | | | | | |
| | itate . Zip Code | FEC I | dentification Number | | | | | | | |
| Purpose of Disbursement | | | *************************************** | | | | | | | |
| SCREEN, VENUE DECOR, PHAN | MPLETS, VIDEO | | | | | | | | | |
| Candidate Name Category/ Amount of Each Disbursement this Period Type | | | | | | | | | | |
| Office Sought: House Disbursem | ent For: | | 1,764.40 | | | | | | | |
| ├ ┤ | Primary ☐ General Other (specify) ▼ | | Community FAMILTON DE COMMUNICATION DE C | | | | | | | |
| State: District: | Cinol (apecity) | L M | emo Item | | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | | | | | | | | |
| TOTAL This Period (last page this line number only) | | | , 3,463.16. | | | | | | | |

| SCHEDULE B (FEC FORM 3X) | Lisa consists ashedula(s) FOR LINE | | NUMBER: PAGE OF | | | | | |
|---|---|--|---|--|--|--|--|--|
| TEMIZED DISBURSEMENTS | Use separate schedule(s) (check of for each category of the | | 9) 22 | | | | | |
| | Detailed Summary Page | X 21b 28a | 28b 28c 29 30b | | | | | |
| Any information copied from such Reports and Statem | nents may not be sold or used | | | | | | | |
| r 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) | | | | | | | | |
| PILIPINO AMERICAN LOS ANGELES D | EMOCRATS | | | | | | | |
| Full Name (Last, First, Middle Initial) | , | | Onto of Dishuranes- | | | | | |
| A. JESSICA CALOZA | | | ate of Disbursement | | | | | |
| Mailing Address 269 LAFAYETTE PLACE #411 | | | 12 (08) (2021) | | | | | |
| City | State Zip Code | | EC Identification Number | | | | | |
| | CA 90057 | | | | | | | |
| Purpose of Disbursement REIMBURSEMENT FOR MESSEN | IGER SERV | 0 0 1 | | | | | | |
| Candidate Name | L | | mount of Each Disbursement this Period | | | | | |
| N/A | | Туре | | | | | | |
| Office Sought: House Disburserr Senate | nent For: Primary General | L | 628-16-4 | | | | | |
| | Other (specify) ▼ | r | Memo Item | | | | | |
| State: District: | | | | | | | | |
| Full Name (Last, First, Middle Initial) 3. | | | Pate of Disbursement | | | | | |
| JESSICA CALOZA | | | MIM / DID / YIVYY | | | | | |
| Mailing Address 269 LAFAYETTE PLACE #411 | | | 12 08 2021 | | | | | |
| | State Zip Code | F | EC Identification Number | | | | | |
| LOS ANGELES Purpose of Disbursement | CA 91750 | r | 1 | | | | | |
| LACDP DUES, ZOOM DUES, AD EXF | 0 0 1 | | | | | | | |
| Candidate Name | 1 100 | Category/ A | mount of Each Disbursement this Period | | | | | |
| Office Sought: House Disburserr | nent For: | Туре | 102.02 | | | | | |
| Senate | Primary General | L . | 193:02 | | | | | |
| President State: District: | Other (specify) | | Memo Item | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | | |
| C | | | Pate of Disbursement | | | | | |
| Mailing Address | | f | M M / D M / Y A A A A A A A A A A A A A A A A A A | | | | | |
| maning radioss | | i. | | | | | | |
| City | State Zip Code | F | EC Identification Number | | | | | |
| Purpose of Disbursement | T | [| | | | | | |
| A | | | | | | | | |
| Candidate Name | Category/ A Type | mount of Each Disbursement this Period | | | | | | |
| Office Sought: House Disbursem | nent For: | 1,700 | | | | | | |
| | Primary General | • | | | | | | |
| President State: District: | Other (specify) ▼ | | Memo Item | | | | | |
| | | F | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | <u> </u> | | | | | | |
| TOTAL This Period (last page this line number only). | | | , 3463.16. | | | | | |

SCHEDULE C (FEC Form 3X) **LOANS**

Use separate schedule(s) for each category of the

PAGE 1 OF 1.

Detailed Summary Page FOR LINE 13 OF FORM 3X NAME OF COMMITTEE (in Full) PILIPINO AMERICAN LOS ANGELES DEMOCRATS Election: ☐ Memo Item LOAN SOURCE Full Name (Last, First, Middle Initial) **Primary** NONE TO REPORT General Mailing Address Other (specify) ▼ City State ZIP Code Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period TERMS Date Due Secured: Date Incurred Interest Rate Yes No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code **Amount** Guaranteed Outstanding: Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code **Amount** Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation State ZIP Code City **Amount** Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... TOTALS This Period (last page in this line only)......... 0 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule

| Federal Election Commission, Washington, D.C. 20463 | , | Page of Schedule C | | | | |
|---|---|--|--|--|--|--|
| NAME OF COMMITTEE (In Full) PILIPINO AMERICAN LOS ANGELES DEN | | FEC IDENTIFICATION NUMBER | | | | |
| LENDING INSTITUTION (LENDER) | Amount of Loan | Interest Rate (APR) | | | | |
| Full Name | Amount of Louis | interest trate (Xi Ti) | | | | |
| NONE TO REPORT | | " | | | | |
| Mailing Address | | | | | | |
| Maining Address | | Mawa / Logol / Laganana | | | | |
| | Date Incurred or Est | ablished | | | | |
| City State Zip Code | Date Due | M M / 0 TO / V V V V V | | | | |
| A. Has loan been restructured? No Yes | s If yes, date originally | y incurred | | | | |
| B. If line of credit, Amount of this Draw: | Total Outsta Baland | | | | | |
| C. Are other parties secondarily liable for the det No Yes (Endorsers and guaran | ot incurred? intors must be reported on Sche | edule C.) | | | | |
| D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No Yes If yes, specify: Does the lender have a perfected interest in it? No Yes | | | | | | |
| E. Are any future contributions or future receipts collateral for the loan? No Yes | If yes, specify: | What is the estimated value? | | | | |
| A depository account must be established pur to 11 CFR 100.82(e)(2) and 100.142(e)(2). | Suant Location of account | | | | | |
| Date account established: | Address. | • | | | | |
| | City, State, Zip: | | | | | |
| the loan amount, state the basis upon which the | | or if the amount pledged does not equal or exceed sis on which it assures repayment. | | | | |
| G. COMMITTEE TREASURER | | DATE | | | | |
| Typed Name Signature | | MAN, LOAD, LANGER | | | | |
| H. Attach a signed copy of the loan agreement. | | | | | | |
| TO BE SIGNED BY THE LENDING INSTITUTION To the best of this institution's knowledge are accurate as stated above. | e, the terms of the loan and other tions (including interest rate) no owers of comparable credit work ant that a loan must be made o | n a basis which assures repayment, and has | | | | |
| AUTHORIZED REPRESENTATIVE | 2 0.11 100.0E and 100.14E | DATE | | | | |
| Typed Name | | | | | | |
| Signature | Title | | | | | |

SCHEDULE D (FEC Form 3X) PAGE 1 OF1 (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each (check only one) 9 **Excluding Loans** numbered line) 10 NAME OF COMMITTEE (In Full) PILIPINO AMERICAN LOS ANGELES DEMOCRATS A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): NONE TO REPORT Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period B. 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 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)..... 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 E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

| TEMIZED INDEPENDENT EXPENDITURES | S | | | PAGE 1 OF 1 FOR LINE 24 OF FORM 3X |
|--|--------------------|-------------------|-------------|--|
| NAME OF COMMITTEE (In Full) | | | | FEC IDENTIFICATION NUMBER ▼ |
| PILIPINO AMERICAN LOS ANGELES D | EMOCRATS | 3 | | C 0 0 7 5 3 9 3 9 |
| Check if 24-hour report 48-hour report | New rep | ort Amends repo | ort filed o | N Mam / Dad / Ashahah |
| Full Name of Payee | | ☐ Memo | Item | Date of Public Distribution/Dissemination |
| NONE TO REPORT | | | | M = M \ 0 = 0 \ \ \ \ A = \ A = \ A |
| Mailing Address | | | | Amount |
| | | | | Amount |
| City | State | Zip Code | | |
| Purpose of Expenditure | | | | Date of Disbursement or Obligation |
| Purpose of Expenditure | | Category/ Type | | Mam (Bab) Aadad |
| Name of Federal Candidate: | | Support | Office | Sought: House District: |
| | | Oppose | | President Senate State: |
| Calendar Year-To-Date | Y 8 9 6 | * * * * 1 | Disbur | sement For: Primary General |
| Per Election for Office Sought | | | | Other (specify) ▶ |
| Full Name of Payee | | ☐ Memo | Item | Date of Public Distribution/Dissemination |
| <u> </u> | | | · | Mam / Dag / Andadad |
| Mailing Address | | | | Amount |
| | T = | · | | VIII ORIII |
| City | State | Zip Code | | |
| Purpose of Expenditure | | | | Date of Disbursement or Obligation |
| Pulpose of Experientale | | Category/ Type | | May / 0,0 / A, |
| Name of Federal Candidate: | | Support | Office | Sought: House District: |
| | | Oppose | | President Senate State: |
| Calendar Year-To-Date | | | Disbur | sement For: Primary General |
| Per Election for Office Sought | | | | Other (specify) ▶ |
| | | • | 1 | |
| (a) SUBTOTAL of Itemized Independent Expenditure | os | | • | 0 |
| (a) SUBTOTAL of Uniternized Independent Expendit | ures . | | . 1 | |
| (4, | | | | |
| (a) TOTAL Independent Expenditures | | | • • | 0 |
| Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candiparty committee) any political party committee or it | date or authorized | | | |
| | | | Mar | MT / DTDT / YTYTYTY |
| Signature | | Date | | |
| | | | | |

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (In Full) PILIPINO AMERICAN LOS ANGELES DEMOCRATS Has your committee been designated to make Full Name of Subordinate Committee coordinated expenditures by a political party committee? YES NO K Mailing Address If YES, name the designating committee: City State ZIP Code Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Mailing Address Type Date Zip Code City State Name of Federal Candidate Supported Office Sought: House State: **Amount** Senate District: Presidential Aggregate General Election Expenditure for this Candidate > Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Mailing Address Type Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: **Amount** Senate District: Presidential Aggregate General Election Expenditure for this Candidate Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure ☐ Memo Item Category/ Mailing Address Type Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: **Amount** Senate District: Presidential Aggregate General Election Expenditure for this Candidate 0 SUBTOTAL of Expenditures This Page (optional)..... 0 TOTAL This Period (last page this line number only)......

PAGE 1

OF

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

| NAME OF COMMITTEE (IN Full) PILIPINO AMERICAN LOS ANGELES DEMOCRATS | | | | | | |
|---|--|--|--|--|--|--|
| USE ONLY ONE SECTION, A or B | | | | | | |
| A. State and Local Party Committees | | | | | | |
| Fixed Percentage (select one) | | | | | | |
| Presidential-Only Election Year (28% Federal) | | | | | | |
| Presidential and Senate Election Year (36% Federal) | | | | | | |
| Senate-Only Election Year (21% Federal) | | | | | | |
| X Non-Presidential and Non-Senate Election Year (15% Federal) | | | | | | |
| B. Separate Segregated Funds and Nonconnected Committees Indicate ratio below | | | | | | |
| Federal% | | | | | | |
| Nonfederal% | | | | | | |
| This ratio applies to (check all that apply): | | | | | | |
| Administrative Generic Voter Drive Public Communications Referencing Party Only | | | | | | |

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE 1 OF 1

NAME OF COMMITTEE (In Full)

PILIPINO AMERICAN LOS ANGELES DEMOCRATS

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only: Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

| are allocated using a time/space method. | | |
|---|-----------|--------------|
| ACTIVITY OR EVENT IDENTIFIER NONE TO REPORT ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported | FEDERAL % | NONFEDERAL % |
| ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported | FEDERAL % | NONFEDERAL % |
| ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported | FEDERAL % | NONFEDERAL % |
| ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported | FEDERAL % | NONFEDERAL % |
| ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported | FEDERAL % | NONFEDERAL % |
| ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported | FEDERAL % | NONFEDERAL % |

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

| | SFERS FROM NONFEDERAL AC CATED FEDERAL / NONFEDERA | | | | | PAGE 1 OF 1 |
|-------|---|---|---|---------------------------------------|---|---------------------------------------|
| | | | | | | FOR LINE 18a OF FORM 3X |
| | OF COMMITTEE (In Full) | | | _ | | |
| | INO AMERICAN LOS ANGELES | | | · · · · · · · · · · · · · · · · · · · | | |
| | NE OF ACCOUNT NE TO REPORT | DATE OF | RECEIPT | · | | TOTAL AMOUNT TRANSFERRED |
| | | | | | | |
| BRE | AKDOWN OF TRANSFER RECEIVED | <u> </u> | | | | |
| i) | Total Administrative | ••••• | | | ·L | |
| | Canadia Matan Palus | | | | Г | |
| " | Generic Voter Drive | | ••••••• | •••••••••• | · L | |
| iii) | Exempt Activities | | | | . [| |
| iv) | Direct Fundraising (List Activity or Event Ide | entifier) | • | | | |
| | | _ | | | - | |
| | a) | | -27 2 | <u> </u> | ٢ | |
| | b) | | | <u> </u> | | |
| | | | | | | |
| | c) Total Amount Transferred For Direct Fundra | | | | · L | 4 |
| (v) | Direct Candidate Support (List Activity or Ex | vent Identifier | r) | | | |
| | a) | | , , , , , , , , , , , , , , , , , , , | | 7 | |
| | | | 47-6-6- | | - | |
| | b) | · L | | _? ? | | |
| | c) Total Amount Transferred For Direct Candid | date Support | | | Γ | |
| | , | | | | | |
| vi) | Public Communications Referring Only to | Party (Made | by PAC) | | L | <u></u> |
| | TOTALS FO | OR BREAKD | OWN OF T | RANSFER RECEI | VED | |
| TOTAL | This Period (Administrative) | •••• | | | | |
| | • | | - | | *************************************** | |
| TOTAL | This Period (Generic Voter Drive) | • | ••••• | | | |
| TOTAL | This Period (Exempt Activities) | | | | | 40 4 40 4 |
| | | | | | | |
| TOTAL | This Period (Direct Fundraising) | | | L. | | |
| TOTAL | This Period (Direct Candidate Support) | | | | | |
| ., | | | | ·· • | | |
| TOTAL | This Period (Public Communications Referring | Only to Par | ty) | | | |
| TOTAL | This Period (Total Amount Transferred) | | | | | 40.4.4.6. |
| | , | | | | | أسيط بيران ببراويبات تنبيان والمساوية |

NONAL ON TOX TOME DOMOGRAM.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE 1 | OF 1 | |
|----------|-------------|----|
| FOR LINE | 21a OF FORM | 3> |

| N/ | ME OF COMMITTEE (In Full) | | | | FOH LINE 21a OF FORM 32 |
|------------|--|----------------|--|---|--|
| | PILIPINO AMERICAN LO Full Name (Last, First, Middle Initial) | S ANG | ELES DEM | OCRATS Memo Item | Allocated Activity or Event: |
| NO | ONE TO REPORT | | | | Administrative Fundraising Exempt |
| | Mailing Address | | | | Voter Drive Direct Candidate Support |
| | City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | Purpose of Disbursement: | · ! | | | Allocated Activity or Event Year-To-Date |
| | Activity or Event Identifier: | | | Category/ Type | Date |
| | FEDERAL SHARE | + | NONFEDERAL | . SHARE | = TOTAL AMOUNT |
| | | | | | |
| <u></u> | Full Name (Last, First, Middle Initial) | | | ☐ Memo Item | Allocated Activity or Event: |
| | | | | | Administrative Fundraising Exempt |
| | Mailing Address | | | | Voter Drive Direct Candidate Support |
| | City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | Purpose of Disbursement: | | | l . | Allocated Activity or Event Year-To-Date |
| | | | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 | | |
| | Activity or Event Identifier: | | | Category/ Type | Date Mark / Tourn / True Yard Yard Yard Yard Yard Yard Yard Yard |
| | FEDERAL SHARE | = TOTAL AMOUNT | | | |
| | | ļ! | | | |
|) . | Full Name (Last, First, Middle Initial) | | | ☐ Memo Item | Allocated Activity or Event: |
| | Mailing Address | | | Administrative Fundraising Exempt Voter Drive Direct Candidate Support | |
| | City | State | Zip Code | | Public Comm (ref to party only) by PAC |
| | Purpose of Disbursement: | 1 | | [A. 10] | Allocated Activity or Event Year-To-Date |
| | Activity or Event Identifier: | | | | |
| | Activity of Evert Identifier. | | | Category/ Type | Date Dug / Yuvuv |
| | FEDERAL SHARE | + | NONFEDERAL | . SHARE | = TOTAL AMOUNT |
| | | , | | -{,::==-{, | ر معالی در این استان دیگر کا د از این |
| | <u> </u> | <u></u> | | <u> </u> | !! |
| SI | JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE | Activity Thi | s Page NONFEDERAL | SHARE | = TOTAL AMOUNT |
| | T COLINE OF MAL | · [| | | all hence of a construction of a constitution of |
| 7/ | TAI This Period (last page for each line only) | | | | de to 21(aVii)) |
| 10 | OTAL This Period (last page for each line only) FEDERAL SHARE | | NONFEDERAL | SHARE | TOTAL AMOUNT |
| | | | <u> </u> | | # # |

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

| o be used by State, District and Local | Party Committees Only) | PAGE 1 OF 1 FOR LINE 18b OF FORM 3X |
|---|---|--|
| NAME OF COMMITTEE (In Full) | | |
| PILIPINO AMERICAN LOS ANGELES DEMO | OCRATS | |
| NAME OF ACCOUNT | DATE OF RECEIPT | TOTAL AMOUNT TRANSFERRED |
| NONE TO REPORT | | |
| BREAKDOWN OF THIS TRANSFER | VOTER REGIST | RATION |
| i) Voter Registration | | nation |
| Total Amount Transferred for Voter | | |
| ii) Voter ID | , , , , , , , , , , , , , , , , , , , | OTER ID |
| Total Amount Transferred for Voter | ID | 4 172 4 4 172 |
| iii) GOTV | | GOTV |
| Total Amount Transferred for GOT\ | / | |
| ha Commission Author | | GENERIC CAMPAIGN ACTIVITY |
| iv) Generic Campaign Activity Total Amount Transferred for General | ric Campaign Activity | |
| | | |
| NAME OF ACCOUNT | DATE OF RECEIPT | TOTAL AMOUNT TRANSFERRED |
| | M M / D D / Y T Y T Y | |
| BREAKDOWN OF THIS TRANSFER | | 1 |
| | VOTER REGIST | RATION |
| i) Voter Registration Total Amount Transferred for Voter | Registration | |
| Total Amount Transletted for York | - 1 | VOTER ID |
| ii) Voter ID | | |
| Total Amount Transferred for Voter | ID: | |
| iii) GOTV | *************************************** | GOTV |
| Total Amount Transferred for GOT\ | / | 5): 8 8 5): 8 8 5:2 4 |
| iv) Generic Campaign Activity | _ | GENERIC CAMPAIGN ACTIVITY |
| , , , | ric Campaign Activity | |
| | | |
| TOTALS FOR BRI | EAKDOWN OF TRANSFER RECEIVED (L | ast Page Only) |
| | | |
| TOTAL This Period (Voter Registration) | | |
| | | |
| TOTAL This Period (Voter ID) | | |
| • | | |
| TOTAL This Period (GOTV) | | 72 |
| • | | |
| TOTAL This Period (Generic Campaign Ad | ctivity) | |
| | | |
| TOTAL This Period (Total Amount of Trans | sters Received) | |
| • . | | |

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

| PAGE | 1 | | OF | 1 | |
|-------|-----|-----|----|------|----|
| FOR L | INE | 30a | OF | FORM | зх |

| ME OF COMMITTEE (In Full) | | | | |
|---|-------------|---------------------------------------|--|---|
| PULIDINO AMERICAN LOS ANGELES DEMOCRATS | | | | |
| A. Full Name (Last, First, Middle Initial) / Full Organization Name NONE TO REPORT | | | | Type of Allocated Activity or Event: Voter Registration GOTV |
| | | | | Voter ID Generic Campaign |
| Mailing Address | | · · · · · · · · · · · · · · · · · · · | | Allocated Activity or Event Year-To-Date |
| City | State | Zip Code | | |
| Purpose of Disbursement Category/ Type | | | | Date |
| FEDERAL SHARE | + | LEVIN SH | | = TOTAL AMOUNT |
| | | | | |
| B. Full Name (Last, First, Middle Initial) | / Full Orga | nization Name | ☐ Memo Item | Type of Allocated Activity or Event: |
| | | | | Voter Registration GOTV |
| | | | | U Voter ID Generic Campaign |
| Mailing Address | | | | Allocated Activity or Event Year-To-Date |
| City | State | Zip Code | 7 - 3- 3- 3 | <u> []</u> |
| Purpose of Disbursement Category/ | | | | Date Date |
| FEDERAL SHARE | + | LEVIN SH | ARE | = TOTAL AMOUNT |
| | | | | |
| C. Full Name (Last, First, Middle Initial) / Full Organization Name | | | | Type of Allocated Activity or Event: Voter Registration GOTV |
| · | | | | Voter ID Generic Campaign |
| Mailing Address | | | Allocated Activity or Event Year-To-Date | |
| City | State | Zip Code | [1; | |
| Purpose of Disbursement | | . <u> </u> | Category/ Type | Date Control (V V V V V V V V V V V V V V V V V V |
| FEDERAL SHARE | + | LEVIN SH | | = TOTAL AMOUNT |
| | | | | |
| UBTOTAL of Shared Federal and Levin Activity This Page | | | | |
| FEDERAL SHARE | + | LEVIN SH پانستان میں میں میں ہوت | | TOTAL AMOUNT |
| | | | | |
| OTAL This Period (last page for each line FEDERAL SHARE | | eral share to 30(a)(i) an | d Levin share to | 30(a)(ii)) TOTAL AMOUNT |
| LEVIN SHARE | | | | |
| DTAL This Period for the Levin Share | | | | |

SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

| NAME OF COMMITTEE (In Full) PILIPINO AMERICAN LOS ANGELES DEMOCRATS | | | | | |
|---|--|--|--------------------------|--|--|
| NAME OF ACCOUNT | | | | | |
| | NONE TO REPORT | | | | |
| | | COLUMN A TOTAL THIS PERIOD | COLUMN B YEAR-TO-DATE | | |
| 1. | RECEIPTS FROM PERSONS (a) Itemized | | | | |
| | (Ose Schedule L-A) | والمنتار المنتار المساور المساور المنتاع المنتاع المساور المناع المنتاع | | | |
| | (b) Unitemized | | | | |
| | (c) Total | | | | |
| 2. | OTHER RECEIPTS | | | | |
| 3. | TOTAL RECEIPTS(Add Lines 1c and 2) | | | | |
| 4. | TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B) | | | | |
| | (a) Voter Registration | | | | |
| | (b) Voter ID | | | | |
| | (c) GOTV | | | | |
| | (d) Generic Campaign | | | | |
| | (e) Total | ال محمد محمد معود محمد | <u></u> | | |
| 5 . | OTHER DISBURSEMENTS | | | | |
| 6. | TOTAL DISBURSEMENTS(Add Lines 4e and 5) | | | | |
| 7. | BEGINNING CASH ON HAND(for Column B, use cash as of January 1st) | | | | |
| 8. | RECEIPTS | | | | |
| O. | (from Line 3) | السم الدوم المسام الدوم المسام الموادية المسام الموادية المسام الموادية المسام الموادية المسام المسا | | | |
| 9. | SUBTOTAL(Add Lines 7 and 8) | | | | |
| 10. | DISBURSEMENTS | | | | |
| 11. | ENDING CASH ON HAND(Subtract Line 10 From Line 9) | | | | |
| | | ···· | | | |

SCHEDULE L-A (FEC Form 3X) **ITEMIZED RECEIPTS OF LEVIN FUNDS**

PAGE 1 OF 1 Use separate schedule(s) for each category of the FOR LINE NUMBER:

| - • • | (| | Aggregation Page | (check only one) 1a 2 | | | |
|--|---|----------|--------------------------|---|--|--|--|
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| \setminus | NAME OF COMMITTEE (In Full) | | | | | | |
| / | PILIPINO AMERICAN LOS ANGELES DEMOCR | ATS | | | | | |
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name | | | | Date of Receipt | | | |
| | | | | M = M / D = O / Y = Y = Y = Y | | | |
| | Mailing Address . | | | | | | |
| | City | State | Zip Code | Amount of Each Receipt this Period | | | |
| | Name of Employer (for Individual) | | | () | | | |
| | reame of Employer (for individual) | | | Aggregate Year-to-Date | | | |
| | Occupation (for Individual) | | | | | | |
| | Full Name of Individual (Last, First, Middle Initial) or Full C | Organiza | tion Name Memo Item | Date of Receipt | | | |
| B. | | | | MAM / DAD / ARABAA | | | |
| | Mailing Address | | | | | | |
| | City | State | Zip Code | Amount of Each Receipt this Period | | | |
| | <u></u> | | | (1) 4 (2) | | | |
| | Name of Employer (for Individual) | | | Aggregate Year-to-Date | | | |
| | Occupation (for Individual) | | | | | | |
| | Full Name of Individual (Leas First Africa Leas First | \ | ion Nome Care to | Date of Secretary | | | |
| C. | Full Name of Individual (Last, First, Middle Initial) or Full C | лganıza | IIIOTI INAME Memo Item | Date of Receipt | | | |
| | Mailing Address | | | لحما لما لما | | | |
| | | | | Amount of Each Receipt this Period | | | |
| | City | State | Zip Code | | | | |
| | Name of Employer (for Individual) | | | | | | |
| | Occupation for Individual | | | Aggregate Year-to-Date | | | |
| | Occupation (for Individual) | | () | | | | |
| D. | Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Memo Item Mailing Address | | | Date of Receipt | | | |
| | | | | | | | |
| | | | | Amount of Cook Description 2 | | | |
| | City | State | Zip Code | Amount of Each Receipt this Period | | | |
| | Name of Employer (for Individual) | | | | | | |
| | | | | Aggregate Year-to-Date | | | |
| | Occupation (for Individual) | | | | | | |
| s | SUBTOTAL of Receipts This Page (optional) | | | | | | |
| | OTAL This Period (last page this line number only) | | | 4,5,4,4,4,5,4,4,5,4,4,5,4,4,5,4,4,5,4,4,5,4,4,5,4,4,5,4,4,5,4,4,5,4,4,5,4,4,5,4,4,5,4,4,5,4,6,4,6 | | | |
| | | | | | | | |

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

| FOR LINE NUMB (check only one) | ER: P | AGE 1 | OF 1 |
|--------------------------------|-------|-------|------|
| (check only one) | ☐ 4a | ☐4c | |
| | 4b | 40 | ۰۵۰ |

| OF LEVIN FUNDS | | Aggregation Page | | 4b 4d 5 | | | |
|---|--|------------------|----------------------|-----------|--|--|--|
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| $\sqrt{}$ | NAME OF COMMITTEE (In Full) | | | | | | |
| ø | PILIPINO AMERICAN LOS ANGELES DEMOCRATS | | | | | | |
| Δ | Full Name (Last, First, Middle Initial) / Full Orga | femo Item | Date of Disbursement | | | | |
| N | ONE TO REPORT | | | | M M / D D / Y Y Y Y | | |
| | Mailing Address | | | | | | |
| | City | State | Zip Code | ĺ | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement | 1 | | | 17: | | |
| В. | Full Name (Last, First, Middle Initial) / Full Orga | nization Name | N | femo Item | Date of Disbursement | | |
| | | | | | M M M / D D / Y W Y W Y W Y | | |
| | Mailing Address | | | ļ | | | |
| | City . | State | Zip Code | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement | l | 1 | | | | |
| C. | Full Name (Last, First, Middle Initial) / Full Orga | nization Name | , | femo Item | Date of Disbursement | | |
| | | | | | MAM / DEO / YEYEY | | |
| | Mailing Address | | | • | لـــا لــا | | |
| | City | State | Zip Code | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement | | . | | 72-1-17-1-17-1-17-1-17-17-17-17-17-17-17-1 | | |
| Full Name (Last, First, Middle Initial) / Full Organization Name D. Memo Item | | | | | Date of Disbursement | | |
| | | | | | <u> </u> | | |
| | Mailing Address | | | | لـــا لــا لــــا | | |
| | City | State | Zip Code | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement | | | | | | |
| Ε. | Full Name (Last, First, Middle Initial) / Full Organization Name | | | | Date of Disbursement | | |
| | Mallian Adda | | | | WEW / DED / AAAAA | | |
| Mailing Address | | | | | | | |
| | City | State | Zip Code | | Amount of Each Disbursement this Period | | |
| | Purpose of Disbursement | • | | | | | |
| S | SUBTOTAL of Disbursements This Page (optional) | | | | | | |
| 7 | OTAL This Period (last page this line number on | ly) | | | | | |

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| Received from Electronic Filing Office | Date of Receipt |
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| (3/2015) | DATE FINERANED |