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FEC MAIL CENTER
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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

BRANNIGAN FOR CONGRESS

ADDRESS (number and street) PO BOX 354

Check if different than previously reported. (ACC) PAROS HEIGHTS IL 60463

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT

C00556027 IL 03

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 11 / 04 / 2014 in the State of IL

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

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

Election on 11 / 04 / 2014 in the State of IL

5. Covering Period 10 / 10 / 2014 through 12 / 30 / 2014

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 MICHAEL K BRANNIGAN

Signature of Treasurer *Michael K Brannigan* Date 11 / 20 / 2014

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

Office Use Only									
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FROM: 11-10-10

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

BRANNIGAN FOR CONGRESS

Report Covering the Period:

From:

70 76 2014

To:

01 31 2015

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))

275⁰⁰

21,860⁰⁰

(b) Total Contribution Refunds
(from Line 20(d))

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

275⁰⁰

21,860⁰⁰

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

55,879.99

27,587.99

(b) Total Offsets to Operating
Expenditures (from Line 14)

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

55,879.99

27,587.99

8. Cash on Hand at Close of
Reporting Period (from Line 27)

500⁰⁰

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

0⁰⁰

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

00

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

BRANNIGAN FOR CONGRESS

Report Covering the Period:

From:

10 16 2014

To:

01 31 2015

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals.....

Handwritten amounts: 295.00, 275.00

Empty boxes for Column B

(b) Political Party Committees.....

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

Empty boxes for Column A

Empty boxes for Column B

(d) The Candidate.....

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

Handwritten amount: 275.00

Empty boxes for Column B

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

Empty boxes for Column A

Empty boxes for Column B

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

Handwritten amounts: 2000.00, 2000.00

Empty boxes for Column B

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

Empty boxes for Column A

Empty boxes for Column B

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

Empty boxes for Column A

Empty boxes for Column B

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

Handwritten amount: 2275.00

Empty boxes for Column B

1-800-4-A-VOTE

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	55,879.4	
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	55,879.4	

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	37,350.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	22,750.00
25. SUBTOTAL (add Line 23 and Line 24).....	60,100.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	55,879.4
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4,220.60

17001 1110 0010

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE		OF
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
BRANNLEAN FOR CONGRESS

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

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

Full Name (Last, First, Middle Initial)		Date of Receipt	
C. Mailing Address		<input type="text"/>	
City	State	Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
<input type="text"/>		<input type="text"/>	
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).....	<input type="text"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

FRONT - MID - BACK

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE OF

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (in Full)

BRANNIGAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. COMMUNICATION EXPENSES

Date of Disbursement

10 / 21 / 2014

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

895.73

Purpose of Disbursement

POLLING

Category/
Type

POLLING
CK # 1012

Candidate Name

SHARON M BRANNIGAN

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

10 / 30 / 2014

B. JBP

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

1963.18

Purpose of Disbursement

ADVERTISING

Category/
Type

ADVERTISING
POSTCARD CK # 1007

Candidate Name

SHARON M BRANNIGAN

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

11 / 03 / 2014

C. DEY ONE

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

425.00

Purpose of Disbursement

Candidate Name

SHARON M BRANNIGAN

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State: District:

CO

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

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

110001-110001-0001

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE OF

17 18 19a 19b
 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

BRANNIGAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE STRATICS GROUP

Date of Disbursement

11/01/2014

Mailing Address

City

State: FL Zip Code: 33618

Amount of Each Disbursement this Period

949.05

Purpose of Disbursement

ROBOCALL

Candidate Name

SHARON M BRANNIGAN

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

CC

Full Name (Last, First, Middle Initial)

B. WALK STREET JOURNAL

Date of Disbursement

11/15/2014

Mailing Address

City

State: MA Zip Code: 01020

Amount of Each Disbursement this Period

28.99

Purpose of Disbursement

NEWS

Candidate Name

SHARON M BRANNIGAN

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

CC

Full Name (Last, First, Middle Initial)

C. BP

Date of Disbursement

11/03/2014

Mailing Address

City

State: Zip Code:

Amount of Each Disbursement this Period

36.99

Purpose of Disbursement

GAS

Candidate Name

SHARON M BRANNIGAN

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

CC

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

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

.....

UNRECORDED COPY

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE OF	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
BRANNIGAN FOR CONGRESS

A. KEV RON PRINTING 6

Full Name (Last, First, Middle Initial)

Mailing Address

City: **HICKORY HILLS** State Zip Code

Purpose of Disbursement: **SIGNS**

Candidate Name: **SHARON M BRANNIGAN** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

Date of Disbursement: **10/31/2014**

Amount of Each Disbursement this Period: **605.00**

CC

B. BEVERLY REVIEW

Full Name (Last, First, Middle Initial)

Mailing Address

City: **CHICAGO** State **IL** Zip Code **60643**

Purpose of Disbursement: **ADVERTISING**

Candidate Name: **SHARON M BRANNIGAN** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

Date of Disbursement: []

Amount of Each Disbursement this Period: **584.00**

CC

C. STRATICS GROUP

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement: **ROBO CALL**

Candidate Name: **SHARON M BRANNIGAN** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

Date of Disbursement: **10/16/2014**

Amount of Each Disbursement this Period: **100.00**

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

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

110001001

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE OF
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
BRANNIGAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)
SHARON M BRANNIGAN

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
12756 POWDEROSA

City **FAVES HEIGHTS** State **IL** ZIP/Code **60463**

Original Amount of Loan **2000⁰⁰** Cumulative Payment To Date Balance Outstanding at Close of This Period

TERMS Date Incurred Date Due Interest Rate Secured:
 Yes No

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:
2. 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
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... **2000⁰⁰**

TOTALS This Period (last page in this line only)..... **2000⁰⁰**

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

42000 - 0001 - 0001 - 0001

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

Supplementary for
 Information found on
 Page _____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) BRANNIGAN FOR CONGRESS		FEC IDENTIFICATION NUMBER C
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR) %
Mailing Address	Date Incurred or Established	M M / D D / Y Y Y Y
City State Zip Code	Date Due	M M / D D / Y Y Y Y

UNDO : FIN : GENU

A. Has loan been restructured? No Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: _____ Total Outstanding Balance: _____

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule 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: _____

What is the value of this collateral?

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account: _____

Date account established: _____ Address: _____

City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Signature	DATE M M / D D / Y Y Y Y
---	-----------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- i. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- ii. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- iii. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	DATE M M / D D / Y Y Y Y
Title	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

A. 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	

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	

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)	▶	
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) ▶		

FORM 1000 01/01/00

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) <i>BRANNUGAN FOR CONGRESS</i>	Report Covering Period: From: 10 / 16 / 2014 To: 01 / 30 / 2015
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Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A			
B	Column Total Last Page Only.....		
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions
A			<i>275⁰⁰</i>
B			
	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A		<i>2000⁰⁰</i>	
B			
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts
A			
B			
	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A		<i>5587.94</i>	
B			
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments
A			
B			
	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A			
B			
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements
A			<i>3500⁰⁰</i>
B			
	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A		<i>472⁰⁰</i>	
B			
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures
A		<i>2275⁰⁰</i>	<i>5587.94</i>
B			

110001-11001-0001

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™



7013 2630 0000 1562 8734



1000



20403

U.S. POSTAGE
PAID
PHILOS HEIGHTS, IL
60469
DEC 08 14
AMOUNT

\$4.91

00049600-04

FIRST CLASS

101

FEDERAL ELECTION COMMISSION
999 E STREET NW
WASHINGTON DC
20509

RECEIVED

NOV 11 2014

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
12/8/14

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark


Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


PREPARER
(8/2013)

12/15/14
DATE PREPARED

11-10-14 10:11:01 AM