

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2016 APR 18 AM 7:53  
Office Use Only

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

12FE4M5

Democratic Women of the South Suburbs

ADDRESS (number and street)

P. O. Box 186

Check if different than previously reported. (ACC)

Flossmoor

Illinois

60422

FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00611798

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

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on  /  /  in the State of

5. Covering Period

01 / 01 / 2016 through 03 / 31 / 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 Hattie Hester

Signature of Treasurer Hattie Hester

Date  /  /  04 / 08 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Democratic Women of the South Suburbs**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="797226"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="797226"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="175686"/>	<input type="text" value="175686"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="972912"/>	<input type="text" value="972912"/>
Total Disbursements (from Line 31).....	<input type="text" value="410306"/>	<input type="text" value="410306"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="562606"/>	<input type="text" value="562606"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	

NEED NOT BE RECORDED

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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 Disbursements

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1 0 0 0 0 0	1 0 0 0 0 0
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. 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 28(a), (b), and (c)).....		
29. Other Disbursements .....	3 1 0 3 0 6	3 1 0 3 0 6
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4 1 0 3 0 6	4 1 0 3 0 6
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4 1 0 3 0 6	4 1 0 3 0 6



**SCHEDULE B (FEC Form 3X)  
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26		
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b		

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)  
**Democratic Women of the South Suburbs**

**A.**

Full Name (Last, First, Middle Initial)  
**Chicago Classic Coach**

Mailing Address  
**401 E Prospect Avenue Suite 113**

City **Chicago** State **Illinois** Zip Code **60056**

Purpose of Disbursement  
**Transportation**

Candidate Name  
**Mt. Prospect**

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) **▼**

Date of Disbursement  
**03 / 17 / 2016**

Amount of Each Disbursement this Period  
**595.00**

Memo Item

**B.**

Full Name (Last, First, Middle Initial)  
**Glenwoodie Golf Club**

Mailing Address  
**19301 State St**

City **Glenwood** State **Illinois** Zip Code **60425**

Purpose of Disbursement  
**fund raising - entertainment**

Candidate Name

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) **▼**

Date of Disbursement  
**03 / 11 / 2016**

Amount of Each Disbursement this Period  
**500.00**

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
**Martinique Banquet Complex**

Mailing Address  
**8200 South Cicero Ave**

City **Burbank** State **Illinois** Zip Code **60459**

Purpose of Disbursement  
**fund raising - food**

Candidate Name

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) **▼**

Date of Disbursement  
**03 / 08 / 2016**

Amount of Each Disbursement this Period  
**500.00**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ **1,595.00**

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

20160314 10:00 AM

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

PAGE OF

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NAME OF COMMITTEE (In Full)  
**Democratic Women of the South Suburbs**

**A.**

Full Name (Last, First, Middle Initial)  
**Shady Creek Winery**

Mailing Address  
**2030 Tryon Road**

City State Zip Code  
**Michigan City, Indiana 46360**

Purpose of Disbursement  
**fund raising**

Candidate Name  
**[Blank]**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) **▼**

State: District:

Date of Disbursement  
**03 / 14 / 2016**

Amount of Each Disbursement this Period  
**250.00**

Memo Item

Category/Type  
**0.03**

**B.**

Full Name (Last, First, Middle Initial)  
**Robin Kelly for Congress**

Mailing Address  
**372 West Ontario Suite 100: c/o LBH Chicago**

City State Zip Code  
**Chicago Illinois 60654**

Purpose of Disbursement  
**political contribution**

Candidate Name  
**[Blank]**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) **▼**

State: District:

Date of Disbursement  
**03 / 24 / 2016**

Amount of Each Disbursement this Period  
**50.00**

Memo Item

Category/Type  
**0.11**

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) **▼**

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

Category/Type

**SUBTOTAL** of Disbursements This Page (optional).....▶ **300.00**

**TOTAL** This Period (last page this line number only).....▶ **3579.35**

EX 186  
SMOOR IL  
10422

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



7025 2520 0001 9399 7849

**FIRST CLASS**

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

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The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER  
(3/2015)



4/18/16

DATE PREPARED

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