

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Illinois Political Active Letter Carriers

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="2015"/>	<input type="text" value="82028.08"/>	<input type="text" value="82028.08"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="76765.79"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3614.00"/>	<input type="text" value="6265.75"/>
(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="80379.79"/>	<input type="text" value="88293.83"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1520.30"/>	<input type="text" value="9434.34"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="78859.49"/>	<input type="text" value="78859.49"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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 Receipts

Write or Type Committee Name

Illinois Political Active Letter Carriers

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2148.00	3035.00
(ii) Unitemized	1466.00	3230.75
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3614.00	6265.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3614.00	6265.75
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3614.00	6265.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3614.00	6265.75

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	395.30	1209.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	395.30	1209.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	125.00	7225.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1520.30	9434.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1520.30	9434.34

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3614.00	6265.75
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3614.00	6265.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	395.30	1209.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	395.30	1209.34

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Illinois Political Active Letter Carriers

A. Cathy Baxter
Full Name (Last, First, Middle Initial)
Mailing Address 545 Farnum
City Aurora State IL Zip Code 60505
FEC ID number of contributing federal political committee. **C**
Name of Employer USPS Occupation Letter Carrier
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 17 / 2015
Transaction ID : SA11AI.14209
Amount of Each Receipt this Period 1000.00
Contribution

B. Michael Caref
Full Name (Last, First, Middle Initial)
Mailing Address 6150 N. Hoyne 2nd Flr
City Chicago State IL Zip Code 60659
FEC ID number of contributing federal political committee. **C**
Name of Employer USPS Occupation Letter Carrier
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA11AI.14221
Amount of Each Receipt this Period 250.00
Contribution

C. David Colegrove
Full Name (Last, First, Middle Initial)
Mailing Address 106 E Jefferson St 61
City Shorewood State IL Zip Code 60431
FEC ID number of contributing federal political committee. **C**
Name of Employer USPS Occupation Letter Carrier
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2015
Transaction ID : SA11AI.14196
Amount of Each Receipt this Period 50.00
Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 7 OF 11
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Illinois Political Active Letter Carriers

A. David Colegrove
Full Name (Last, First, Middle Initial)

Mailing Address 106 E Jefferson St
61

City Shorewood State IL Zip Code 60431

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

Name of Employer USPS Occupation Letter Carrier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 06 / 2015
Transaction ID : SA11AI.14199

Amount of Each Receipt this Period
50.00

Contribution

B. Holly Dexter
Full Name (Last, First, Middle Initial)

Mailing Address 303 Elder Ln.

City Belvidere State IL Zip Code 61008

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

Name of Employer USPS Occupation Letter Carrier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
03 / 18 / 2015
Transaction ID : SA11AI.14222

Amount of Each Receipt this Period
240.00

Contribution

C. Tony Hutson
Full Name (Last, First, Middle Initial)

Mailing Address 28 Glenwood Ln.

City Chatham State IL Zip Code 62629

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

Name of Employer USPS Occupation Letter Carrier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 17 / 2015
Transaction ID : SA11AI.14214

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 11
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Illinois Political Active Letter Carriers

A. Full Name (Last, First, Middle Initial)
Andrew Lykos

Mailing Address 316 N Ridgeland Ave

City State Zip Code
Oak Park IL 60302

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

Name of Employer Occupation
USPS Letter Carrier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
308.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2015

Transaction ID : SA11AI.14215

Amount of Each Receipt this Period
308.00

Contribution

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	308.00
TOTAL This Period (last page this line number only).....▶	2148.00

**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 checked="" 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

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NAME OF COMMITTEE (In Full)
Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. AT & T

Mailing Address Bill Payment Center

City State Zip Code
Saginaw WI 48663

Purpose of Disbursement
Telephone Fax line

Candidate Name
Illinois Political Active Letter Carriers

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2015

Transaction ID : **SB21B.14193**

Amount of Each Disbursement this Period

25.90

Full Name (Last, First, Middle Initial)

B. AT & T

Mailing Address Bill Payment Center

City State Zip Code
Saginaw WI 48663

Purpose of Disbursement
Computer Access

Candidate Name
Illinois Political Active Letter Carriers

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2015

Transaction ID : **SB21B.14224**

Amount of Each Disbursement this Period

97.33

Full Name (Last, First, Middle Initial)

C. AT & T

Mailing Address Bill Payment Center

City State Zip Code
Saginaw WI 48663

Purpose of Disbursement
Cell Phone

Candidate Name
Illinois Political Active Letter Carriers

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2015

Transaction ID : **SB21B.14225**

Amount of Each Disbursement this Period

73.75

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

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

196.98

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 checked="" 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

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NAME OF COMMITTEE (In Full)
Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 16189 S Harlem

City State Zip Code
Tinley Park IL 60477

Purpose of Disbursement
Office Supplies

Candidate Name
Illinois Political Active Letter Carriers

Office Sought: House Senate President
 Disbursement For: 2015 Primary General Other (specify) ▼
 State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SB21B.14190

Amount of Each Disbursement this Period

55.39

Full Name (Last, First, Middle Initial)

B.

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

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

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

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

55.39

252.37

**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 checked="" 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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. Kelly Robin ffor Congress

Mailing Address 372 W. Ontario St.
Suite 100

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Contribution

Candidate Name

Kelly Robin ffor Congress

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: IL District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SB23.14227

Amount of Each Disbursement this Period

1000.00

B.

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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

1000.00

1000.00