

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

To Protect Our Heritage PAC

ADDRESS (number and street) 2421 W. Pratt  
Chicago IL 60645

2. **FEC IDENTIFICATION NUMBER** C00135541  
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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
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 2011 through 06 30 2011

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 Alan E. Molotsky

Signature of Treasurer Electronically Filed by Alan E. Molotsky Date 07 31 2011

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

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
To Protect Our Heritage PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		197575.21
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	197575.21									
(c) Total Receipts (from Line 19) .....	17199.04	17199.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	214774.25	214774.25								
7. Total Disbursements (from Line 31) .....	21865.67	21865.67								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	192908.58	192908.58								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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  
To Protect Our Heritage PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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) .....	16100.00	16100.00
(ii) Unitemized .....	1050.00	1050.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	17150.00	17150.00
(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) .....	17150.00	17150.00
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.) .....	49.04	49.04
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 Transfer (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)) .....	17199.04	17199.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	17199.04	17199.04

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	10865.67	10865.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	10865.67	10865.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	11000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	21865.67	21865.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21865.67	21865.67

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) .....	17150.00	17150.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17150.00	17150.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10865.67	10865.67
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10865.67	10865.67

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
To Protect Our Heritage PAC

**A.** Full Name (Last, First, Middle Initial)  
Daniel Asher

Mailing Address 211 E. Chicago Avenue

City State Zip Code  
Chicago IL 60611

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

Name of Employer Equitec Proprietary Markets      Occupation Broker

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 02 / 17 / 2011  
Transaction ID: SA11AI.6146  
Amount of Each Receipt this Period: 5000.00  
Contribution to our PAC

**B.** Full Name (Last, First, Middle Initial)  
Ethel C. Fenig

Mailing Address 6833 N. Kedzie

City State Zip Code  
Chicago IL 60645

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

Name of Employer Chicago Board of Education      Occupation Teacher

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 09 / 2011  
Transaction ID: SA11AI.6161  
Amount of Each Receipt this Period: 250.00  
Contribution to our PAC

**C.** Full Name (Last, First, Middle Initial)  
Shayle Gerstein

Mailing Address 9655 Woods Dr.

City State Zip Code  
Skokie IL 60077

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

Name of Employer Retired      Occupation Retired

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 07 / 2011  
Transaction ID: SA11AI.6162  
Amount of Each Receipt this Period: 250.00  
Contribution to our PAC

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5500.00

**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: (check only one)	PAGE 7 / 16
	<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)  
To Protect Our Heritage PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ivan Himmel		Date of Receipt
	Mailing Address 600 W. Jackson Blvd. #200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 1 0 / 2 0 1 1
	City	State	Zip Code
	Chicago	IL	60661
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.6164
Name of Employer Bravo Restaurants		Occupation Restaurant Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 350.00
			Contribution to our PAC

<b>B.</b>	Full Name (Last, First, Middle Initial) Cheryl Lewin		Date of Receipt
	Mailing Address 1560 N Sandburg Terrace		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 6 / 2 0 / 2 0 1 1
	City	State	Zip Code
	Chicago	IL	60610
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.6170
Name of Employer Self		Occupation Activist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			Contribution to our PAC

<b>C.</b>	Full Name (Last, First, Middle Initial) Andrew J. Shechtel		Date of Receipt
	Mailing Address 33 Witherspoon St. 3rd Floor		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 2 1 / 2 0 1 1
	City	State	Zip Code
	Princeton	NJ	08542
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.6144
Name of Employer Self Employed		Occupation Investor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
			Contribution to our PAC

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 5600.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 16	
	(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)  
To Protect Our Heritage PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Raquel K. Shechtel		Date of Receipt																					
	Mailing Address 33 Witherspoon St. 3rd Floor		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	1		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		2	1		2	0	1	1														
	City	State	Zip Code		<b>Transaction ID:</b> SA11AI.6145																			
	Princeton	NJ	08542																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Self		Occupation Housewife		<input type="text" value="5000.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		Contribution to our PAC																				
		<input type="text" value="5000.00"/>																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="16100.00"/>



**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)  
To Protect Our Heritage PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Larry Greenberg	<b>Transaction ID:</b> SB21B.6213 <b>Date of Disbursement</b> 04 / 27 / 2011
	Mailing Address 9727 Gross Point Road	
	City Skokie State IL Zip Code 60076	Amount of Each Disbursement this Period 71.91
	Purpose of Disbursement Website registration fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type: 001	
<b>B.</b>	Full Name (Last, First, Middle Initial) Internal Revenue Service	<b>Transaction ID:</b> SB21B.6197 <b>Date of Disbursement</b> 02 / 22 / 2011
	Mailing Address Department of Treasury	
	City Ogden State TN Zip Code 84409	Amount of Each Disbursement this Period 698.87
	Purpose of Disbursement Taxes on interest earned for 2010 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type: 001	
<b>C.</b>	Full Name (Last, First, Middle Initial) Jewish United Fund	<b>Transaction ID:</b> SB21B.6198 <b>Date of Disbursement</b> 02 / 22 / 2011
	Mailing Address 1 S. Franklin St.	
	City Chicago State IL Zip Code 60606	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Sponsorship of community event for publicity of PAC Name - not solicitation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type: 004	

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

1270.78

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

# 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)  
To Protect Our Heritage PAC

A.

Full Name (Last, First, Middle Initial)  
Moneris Solutions Inc.

Transaction ID: SB21B.6149  
Date of Disbursement

Mailing Address 700 East Lake Cook Road

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	1

City Elk Grove Village State IL Zip Code 60089

Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Monthly Processing Charges

003
Category/ Type

55.00
-------

Candidate Name

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

B.

Full Name (Last, First, Middle Initial)  
Moneris Solutions Inc.

Transaction ID: SB21B.6150  
Date of Disbursement

Mailing Address 700 East Lake Cook Road

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	1

City Elk Grove Village State IL Zip Code 60089

Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Monthly Processing Charges

003
Category/ Type

55.00
-------

Candidate Name

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

C.

Full Name (Last, First, Middle Initial)  
Moneris Solutions Inc.

Transaction ID: SB21B.6152  
Date of Disbursement

Mailing Address 700 East Lake Cook Road

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	1

City Elk Grove Village State IL Zip Code 60089

Amount of Each Disbursement this Period

Purpose of Disbursement  
Credit Card Monthly Processing Charges

003
Category/ Type

55.00
-------

Candidate Name

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

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

165.00
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TOTAL This Period (last page this line number only) ..... ▶

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**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)  
To Protect Our Heritage PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Mosaic Enterprises Inc.</p> <p>Mailing Address 4150 Emerson St.</p> <p>City Skokie State IL Zip Code 60076</p> <p>Purpose of Disbursement Website design and maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6177</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5250.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Mosaic Enterprises Inc.</p> <p>Mailing Address 4150 Emerson St.</p> <p>City Skokie State IL Zip Code 60076</p> <p>Purpose of Disbursement Website updating services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6178</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Nadine Heindinger Design</p> <p>Mailing Address 173 W. 81st Street Suite 5d</p> <p>City New York State NY Zip Code 10024</p> <p>Purpose of Disbursement Logo design for PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6201</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> <p>Category/Type: <input type="text" value="003"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="7050.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

**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)  
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Peggy P. Shapiro	Transaction ID: SB21B.6214 Date of Disbursement
	Mailing Address 4545 W. Touhy	<input type="text" value="05"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Lincolnwood State IL Zip Code 60712	Amount of Each Disbursement this Period
	Purpose of Disbursement Copying for UN petition presentation - educational event	<input type="text" value="58.47"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Peggy P. Shapiro	Transaction ID: SB21B.6175 Date of Disbursement
	Mailing Address 4545 W. Touhy	<input type="text" value="06"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Lincolnwood State IL Zip Code 60712	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimburse travel to present PAC petition to UN - Educational Event	<input type="text" value="869.84"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: SB21B.6176 Date of Disbursement
	Mailing Address Dirkson Federal Office Building	<input type="text" value="06"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Chicago State IL Zip Code 60604	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage for newsletter to mailing list	<input type="text" value="660.00"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1588.31"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="10074.09"/>

# 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)

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<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)  
To Protect Our Heritage PAC

A.

Full Name (Last, First, Middle Initial)  
BERKLEY FOR SENATE

Transaction ID: SB23.6183  
Date of Disbursement

Mailing Address 3069 CONQUISTA COURT

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	1

City LAS VEGAS State NV Zip Code 89121

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Contribution to election campaign

011  
Category/  
Type

Candidate Name  
BERKLEY FOR SENATE

Office Sought:  House  
 Senate  
 President  
State: NV District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
CANTOR FOR CONGRESS

Transaction ID: SB23.6187  
Date of Disbursement

Mailing Address P. O. Box 17813

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	1	1

City Richmond State VA Zip Code 23226

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Contribution to election campaign

011  
Category/  
Type

Candidate Name  
CANTOR FOR CONGRESS

Office Sought:  House  
 Senate  
 President  
State: VA District: 07

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
COSTELLO FOR CONGRESS COMMITTEE

Transaction ID: SB23.6191  
Date of Disbursement

Mailing Address P. O. BOX 8250

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

City BELLEVILLE State IL Zip Code 62222

Amount of Each Disbursement this Period

-500.00
---------

Purpose of Disbursement  
Campaign contribution never cashed 9/2010

011  
Category/  
Type

Candidate Name  
COSTELLO FOR CONGRESS COMMITTEE

Office Sought:  House  
 Senate  
 President  
State: IL District: 12

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

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

3000.00
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TOTAL This Period (last page this line number only) .....

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**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)

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<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)  
To Protect Our Heritage PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>DEUTCH, THEODORE ELIOT</b>	<b>Transaction ID:</b> SB23.6179 Date of Disbursement 06 / 16 / 2011	
	Mailing Address 12373 CASCADES POINTE DRIVE		
	City BOCA RATON State FL Zip Code 33428	Amount of Each Disbursement this Period	500.00
	Purpose of Disbursement Contribution to election campaign	011 Category/ Type	
	Candidate Name DEUTCH, THEODORE ELIOT		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 19	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>LOBIONDO FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.6189 Date of Disbursement 03 / 07 / 2011	
	Mailing Address P. O. BOX 550		
	City VINELAND State NJ Zip Code 08362	Amount of Each Disbursement this Period	2000.00
	Purpose of Disbursement Contribution to election campaign	011 Category/ Type	
	Candidate Name LOBIONDO FOR CONGRESS		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MANZULLO, DONALD A.</b>	<b>Transaction ID:</b> SB23.6180 Date of Disbursement 04 / 28 / 2011	
	Mailing Address 792 E Lightsville Rd		
	City Egan State IL Zip Code 61047	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Contribution to election campaign	011 Category/ Type	
	Candidate Name MANZULLO, DONALD A.		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**3500.00**

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

**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)

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<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)  
To Protect Our Heritage PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MENENDEZ FOR SENATE</b>	<b>Transaction ID:</b> SB23.6186
	Mailing Address <b>ONE GATEWAY CENTER SUITE 520</b>	Date of Disbursement MM / DD / YYYY <b>03 / 23 / 2011</b>
	City <b>NEWARK</b> State <b>NJ</b> Zip Code <b>07102</b>	Amount of Each Disbursement this Period <b>5000.00</b>
	Purpose of Disbursement Contribution to election campaign Candidate Name <b>MENENDEZ FOR SENATE</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>NJ</b> District: <b>00</b> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>011</b> Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>SCHOCK FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.6181
	Mailing Address <b>PO Box 10555</b>	Date of Disbursement MM / DD / YYYY <b>06 / 29 / 2011</b>
	City <b>Peoria</b> State <b>IL</b> Zip Code <b>61612</b>	Amount of Each Disbursement this Period <b>500.00</b>
	Purpose of Disbursement Contribution to election campaign Candidate Name <b>SCHOCK FOR CONGRESS</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>IL</b> District: <b>18</b> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>011</b> Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>THUNE, JOHN</b>	<b>Transaction ID:</b> SB23.6192
	Mailing Address <b>200 NORTH PHILLIPS AVE SUITE L101</b>	Date of Disbursement MM / DD / YYYY <b>06 / 30 / 2011</b>
	City <b>SIOUX FALLS</b> State <b>SD</b> Zip Code <b>57104</b>	Amount of Each Disbursement this Period <b>-500.00</b>
	Purpose of Disbursement Campaign contribution never cashed 2/2010 Candidate Name <b>THUNE, JOHN</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>SD</b> District: <b>00</b> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>011</b> Category/ Type

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

**5000.00**

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

**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)

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<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)  
To Protect Our Heritage PAC

A.

Full Name (Last, First, Middle Initial)  
VAN HOLLEN FOR CONGRESS

Transaction ID: SB23.6190

Date of Disbursement

Mailing Address 10537 St. Paul St.

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

City Kensington State MD Zip Code 20895

Amount of Each Disbursement this Period

-500.00
---------

Purpose of Disbursement  
Campaign contribution never cashed 9/2010

011
Category/ Type

Candidate Name  
VAN HOLLEN FOR CONGRESS

Office Sought:  House  
 Senate  
 President  
State: MD District: 08

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

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

-500.00
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TOTAL This Period (last page this line number only) ..... ►

1100.00
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