

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

Friends of Philanise White

ADDRESS (number and street)

8447 S. Phillips

Check if different than previously reported. (ACC)

Chicago

IL

60617

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00762807

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

IL

01

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

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

11 / 03 / 2020

in the State of

IL

5. Covering Period

M M / D D / Y Y Y Y

11 / 07 / 2018

through

M M / D D / Y Y Y Y

11 / 23 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

WRIGHT, ADRIAN, , ,

Type or Print Name of Treasurer

Signature of Treasurer

WRIGHT, ADRIAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

11 / 25 / 2020

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Friends of Philanise White**

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

	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))....	6288.60	6238.60
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6288.60	6238.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	4722.85	4722.85
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4722.85	4722.85
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1240.75	
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	

**For further information contact:**

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

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

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

PAGE 3 / 15

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Friends of Philanise White

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

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2020"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2020"/> (date after general election)  through <input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2020"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="2457.88"/>	<input type="text" value="2457.88"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="3830.72"/>	<input type="text" value="3780.72"/>	<input type="text" value="50.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="6288.60"/>	<input type="text" value="6238.60"/>	<input type="text" value="50.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 15

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
6288.60	6238.60	50.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
6288.60	6238.60	50.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 15

Write or Type Committee Name

Friends of Philanise White

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

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
<input type="text" value="4722.85"/>	<input type="text" value="4722.85"/>	<input type="text" value="0.00"/>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 15

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

**21. OTHER DISBURSEMENTS**

325.00	325.00	0.00
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**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

5047.85	5047.85	0.00
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

6288.60	6238.60	50.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

4722.85	4722.85	0.00
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	6288.60
25. SUBTOTAL (add Line 23 and Line 24).....	6288.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5047.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	1240.75

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 15	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Friends of Philanise White**

**A.** Full Name (Last, First, Middle Initial)  
**ABULENCIA, EMMA, , ,**

Mailing Address 6422 W.  
RAVEN ST.

City CHICAGO	State IL	Zip Code 60631
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FEC ID number of contributing federal political committee. **C**

Name of Employer LOYOLA	Occupation RN
----------------------------	------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 23 / 2020

**Transaction ID : SA11AI.4330**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION EARMARKED THROUGH CONDUIT WINR

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
787.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 23 / 2020

**Transaction ID : SA11AI.4330.0**

Amount of Each Receipt this Period  
250.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT

**C.** Full Name (Last, First, Middle Initial)  
**ABULENCIA, EMMA, , ,**

Mailing Address 6422 W.  
RAVEN ST.

City CHICAGO	State IL	Zip Code 60631
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FEC ID number of contributing federal political committee. **C**

Name of Employer LOYOLA	Occupation RN
----------------------------	------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
270.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 17 / 2020

**Transaction ID : SA11AI.4109**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	270.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 8 OF 15
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Friends of Philanise White**

**A.** Full Name (Last, First, Middle Initial)  
**BRADFORD, JAMES, , ,**

Mailing Address 12119 S.  
PAULASKI

City ALSIP State IL Zip Code 60803

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

Name of Employer N/A Occupation RETIRED

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 11 / 2020

Transaction ID : SA11AI.4498

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION EARMARKED THROUGH CONDUIT WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2496.51

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 11 / 2020

Transaction ID : SA11AI.4498.0

Amount of Each Receipt this Period  
250.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT

**C.** Full Name (Last, First, Middle Initial)  
**CALUMET BAKERY**

Mailing Address 18349  
TORRENCE

City LANSING State IL Zip Code 60438

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
206.25

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 17 / 2020

Transaction ID : SA11AI.4253

Amount of Each Receipt this Period  
206.25

Memo Item  
In-kind - CAKE

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	456.25
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 15	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Philanise White**

**A.** Full Name (Last, First, Middle Initial)  
**OZINGA BROTHERS INC**

Mailing Address 19001  
OLD LAGRANGE RD

City MOKENA State IL Zip Code 60448

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
231.63

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2019

Transaction ID : SA11AI.4251

Amount of Each Receipt this Period  
231.63

Memo Item  
In-kind - STICKERS

**B.** Full Name (Last, First, Middle Initial)  
**PORTER, RICHARD, , ,**

Mailing Address 300 N.  
LA SALLE DR.

City CHICAGO State IL Zip Code 60654

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

Name of Employer Occupation  
SELF EMPLOYES PC LAWYER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 07 / 2019

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PORTER, RICHARD, , ,**

Mailing Address 300 N.  
LA SALLE DR.

City CHICAGO State IL Zip Code 60654

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

Name of Employer Occupation  
SELF EMPLOYES PC LAWYER

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2020

Transaction ID : SA11AI.4542

Amount of Each Receipt this Period  
750.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1481.63
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 15	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Philanise White**

**A.** Full Name (Last, First, Middle Initial)  
**STAAT, LAWRENCE, , ,**

Mailing Address 111 W.  
WACKER DR

City CHICAGO	State IL	Zip Code 60601
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FEC ID number of contributing federal political committee. **C**

Name of Employer HARRISON HELD LLP	Occupation LAWYER
---------------------------------------	----------------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2020

**Transaction ID : SA11AI.4563**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION EARMARKED THROUGH CONDUIT WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3332.51

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2020

**Transaction ID : SA11AI.4563.0**

Amount of Each Receipt this Period  
250.00

Memo Item  
TOTAL EARMARKED THROUGH CONDUIT

**C.** Full Name (Last, First, Middle Initial)  
**WHITE, PHILANISE, , ,**

Mailing Address 8447 S. PHILLIPS

City CHICAGO	State IL	Zip Code 60617
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FEC ID number of contributing federal political committee. **C** H0IL01194

Name of Employer LOYOLA	Occupation RENAL TECH
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2019

**Transaction ID : SA11AI.4154**

Amount of Each Receipt this Period  
280.00

Memo Item  
In-kind - WEBSITE FOR CAMPAIGN

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	2457.88

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4154

VENDOR: GODADDY.COM

Form/Schedule:

Transaction ID:

**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 12 OF 15	
	<input checked="" 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)  
**Friends of Philanise White**

Full Name (Last, First, Middle Initial) <b>A. BP GAS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2020
Mailing Address 1001 S. 1ST AVE		FEC Identification Number C
City MAYWOOD	State IL	Zip Code 60153
Purpose of Disbursement GAS		Amount of Each Disbursement this Period 22.78
Candidate Name		Transaction ID : SB17.4350
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BUILD A SIGN</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020
Mailing Address 11525A STONEHOLLOW DR		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78758
Purpose of Disbursement PRINTING		Amount of Each Disbursement this Period 225.25
Candidate Name		Transaction ID : SB17.4226
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BUILD A SIGN</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2020
Mailing Address 11525A STONEHOLLOW DR		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78758
Purpose of Disbursement PRINTING		Amount of Each Disbursement this Period 513.93
Candidate Name		Transaction ID : SB17.4270
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	761.96
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 13 OF 15	
	<input checked="" 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)  
**Friends of Philanise White**

Full Name (Last, First, Middle Initial) <b>A. CALUMET BAKERY</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2020
Mailing Address 18349 TORRENCE		FEC Identification Number C
City LANSING	State IL	Zip Code 60438
Purpose of Disbursement In-kind - CAKE		Amount of Each Disbursement this Period 206.25
Candidate Name		Transaction ID : SB17.4257
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GODADDY.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2019
Mailing Address 14455 HAYDEN RD		FEC Identification Number C
City SCOTTSDALE	State AZ	Zip Code 85260
Purpose of Disbursement WEB HOSTING SERVICE		Amount of Each Disbursement this Period 280.00
Candidate Name		Transaction ID : SB17.4157
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KENOOTZ PIZZA</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2020
Mailing Address 4659 W 147TH STREET		FEC Identification Number C
City MIDLOTHIAN	State IL	Zip Code 60445
Purpose of Disbursement In-kind - CATERING		Amount of Each Disbursement this Period 100.00
Candidate Name		Transaction ID : SB17.4256
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	306.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 14 OF 15	
	<input checked="" 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)  
**Friends of Philanise White**

Full Name (Last, First, Middle Initial) <b>A. OZINGA BROTHERS INC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2019
Mailing Address 19001 OLD LAGRANGE RD		FEC Identification Number C
City MOKENA	State IL	Zip Code 60448
Purpose of Disbursement In-kind - STICKERS		Amount of Each Disbursement this Period 231.63
Candidate Name		Transaction ID : SB17.4258
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WHITE, PHILANISE, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2019
Mailing Address 8447 S. PHILLIPS		FEC Identification Number C H0IL01194
City CHICAGO	State IL	Zip Code 60617
Purpose of Disbursement In-kind - WEBSITE FOR CAMPAIGN		Amount of Each Disbursement this Period 280.00
Candidate Name		Transaction ID : SB17.4155
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: IL District: 01		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Transaction ID
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	231.63
<b>TOTAL</b> This Period (last page this line number only).....▶	1299.84

**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 15 OF 15	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Philanise White**

Full Name (Last, First, Middle Initial) <b>A. Friends of Philanise White</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2020	
Mailing Address 8447 S. Phillips			FEC Identification Number C C00762807	
City Chicago	State IL	Zip Code 60617	Amount of Each Disbursement this Period 325.00	
Purpose of Disbursement ELECTION DAY VOLUNTEER EXPENSES		Category/ Type 007	Transaction ID : SB21.4556	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: IL District: 01				

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	325.00