

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

NORTHERN TRUST CORPORATION POLITICAL ACTION COMMITTEE (NORTHERN TRUST PAC)

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="2014"/>	<input type="text" value="1886.05"/>	<input type="text" value="1886.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10486.05"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4510.00"/>	<input type="text" value="14360.00"/>
(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="14996.05"/>	<input type="text" value="16246.05"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5500.00"/>	<input type="text" value="6750.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9496.05"/>	<input type="text" value="9496.05"/>
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

NORTHERN TRUST CORPORATION POLITICAL ACTION COMMITTEE (NORTHERN TRUST PAC)

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).....	1670.00	8270.00
(ii) Unitemized	2840.00	6090.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4510.00	14360.00
(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)	4510.00	14360.00
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.).....	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))..... ▶	4510.00	14360.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4510.00	14360.00

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	5500.00	6750.00
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)) ..	5500.00	6750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5500.00	6750.00

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)	4510.00	14360.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4510.00	14360.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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)
NORTHERN TRUST CORPORATION POLITICAL ACTION COMMITTEE (NORTHERN TRUST PAC)

Full Name (Last, First, Middle Initial) A. Michael Cogan		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.11926
Mailing Address 18273 Stony Point Drive		Amount of Each Receipt this Period 200.00
City Stongsville	State OH	Zip Code 44136
FEC ID number of contributing federal political committee. C		
Name of Employer Northern Trust	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Tara Dziengel		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.11921
Mailing Address 1523 North Thatcher		Amount of Each Receipt this Period 300.00
City River Forest	State IL	Zip Code 60305
FEC ID number of contributing federal political committee. C		
Name of Employer Northern Trust	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Andrew M Glick		Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.11927
Mailing Address 1137 West Monroe Street #10		Amount of Each Receipt this Period 100.00
City Chicago	State IL	Zip Code 60607
FEC ID number of contributing federal political committee. C		
Name of Employer Northern Trust	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 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

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST CORPORATION POLITICAL ACTION COMMITTEE (NORTHERN TRUST PAC)

Full Name (Last, First, Middle Initial) A. Susan Gurney		Date of Receipt
Mailing Address 1340 West Diversey #2		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.11928
Name of Employer Northern Trust		Amount of Each Receipt this Period
Occupation Banker		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) B. Bruce C Janovsky		Date of Receipt
Mailing Address 774 Inverness Dr		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Aurora	State IL	Zip Code 60504
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.11929
Name of Employer Northern Trust		Amount of Each Receipt this Period
Occupation Banker		<input type="text" value="150.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) C. Jeffrey King		Date of Receipt
Mailing Address 2317 Stadium Drive		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Fort Worth	State TX	Zip Code 76109
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.11930
Name of Employer Northern Trust		Amount of Each Receipt this Period
Occupation Banker		<input type="text" value="300.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="500.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST CORPORATION POLITICAL ACTION COMMITTEE (NORTHERN TRUST PAC)

A. Bruce Fredric Letten
 Full Name (Last, First, Middle Initial)
 Mailing Address 924 Oxford Road
 City State Zip Code
 Deerfield IL 60015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Northern Trust Banker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11AI.11933
 Amount of Each Receipt this Period
 200.00

B. Lori Nerenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 699 Sheridan Road
 City State Zip Code
 Wilmette IL 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Northern Trust Banker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11AI.11936
 Amount of Each Receipt this Period
 100.00

C. Andrew Paciocco
 Full Name (Last, First, Middle Initial)
 Mailing Address 6129 Paseo La Vista
 City State Zip Code
 Woodland Hills CA 91367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Northern Trust Banker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11AI.11937
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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)

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST CORPORATION POLITICAL ACTION COMMITTEE (NORTHERN TRUST PAC)

Full Name (Last, First, Middle Initial)

A. John Cullerton

Mailing Address 312 S. Fourth Street, Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement

011

Candidate Name

Citizens for John Cullerton

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2014

Transaction ID : SB29.11918

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Jim Durkin

Mailing Address Post Office Box 367

City Western Springs State IL Zip Code 60558

Purpose of Disbursement

011

Candidate Name

Citizens for Durkin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 82

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2014

Transaction ID : SB29.11915

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Bridget Gainer

Mailing Address 1248 W. Altgeld Street

City Chicago State IL Zip Code 60614

Purpose of Disbursement

011

Candidate Name

Citizens for Bridget Gainer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2014

Transaction ID : SB29.11919

Amount of Each Disbursement this Period

1000.00

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)

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHERN TRUST CORPORATION POLITICAL ACTION COMMITTEE (NORTHERN TRUST PAC)

Full Name (Last, First, Middle Initial)

A. Don Harmon

Mailing Address 1243 N. Woodbine Ave
Suite 102

City Oak Park State IL Zip Code 60302

Purpose of Disbursement

011

Candidate Name
Friends of Don Harmon

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 29 / 2014

Transaction ID : SB29.11917

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Elaine Nekritz

Mailing Address 1926 Waukegan Road

City Glenview State IL Zip Code 60025-1790

Purpose of Disbursement

011

Candidate Name
Citizens for Elaine Nekritz

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 29 / 2014

Transaction ID : SB29.11914

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

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)..... ▶

2000.00

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

5500.00