851103

PAGE 1 / 10

REPORT OF RECEIPTS
AND DISBURSEMENTS

For Other Than An Authorized Committee

				Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, to over the lines.	type 12FE4M5	
Illinois Political Activ	ve Letter Carriers			
ADDRESS (number and stree	t) P.O. Box 561			
Check if different than previously reported. (ACC)	Orland Park			60462
2. FEC IDENTIFICATION		ΓY 🔺	STATE 🔺	ZIP CODE
C C00264689		S THIS X NEW	OR AM	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:			20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:				20 (M10) (Non-Election Year Only) 20 (M10) Jan 31 (YE)
April 15 Quarterly Repo July 15 Quarterly Repo	ort (Q1) (C) 12-Day PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Repo January 31			c) Special (*	in the
Year-End Report July 31 Mid-Ye Report (Non-el Year Only) (M	ar (d) 30-Day ection () POST -Election	General (30G)	Runoff (3	OR) Special (30S)
Termination Re (TER)	Port Report for the:			in the State of
5. Covering Period	M M / D D / Y	through	M M / D D / 08 31	2015
I certify that I have examine Type or Print Name of Trea	ed this Report and to the best of surer Mr. Jack Heniff	my knowledge and belie	ef it is true, correct and	complete.
Signature of Treasurer	Mr. Jack Heniff	[Electronically Fil	led] Date 08	/ D D / Y Y Y Y 19 2015
	erroneous, or incomplete informatio	n may subject the person	signing this Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENT

	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
۷	Vrite or Type Committee Name		
	Illinois Political Active Letter Carrie	ers	
F		08 / D D / Y Y Y Y Y 01 2015 To:	M M / D / Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		82028.08
	(b) Cash on Hand at Beginning of Reporting Period	100076.76	
	(c) Total Receipts (from Line 19)	321.00	42798.48
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	100397.76	124826.56
7.	Total Disbursements (from Line 31)	3628.78	28057.58
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	96768.98	96768.98
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY 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

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DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Illinois Political Active Letter Carriers

Report Covering the Period: From: 08	/ D D / Y Y Y Y 01 2015 Te	o: 08 / 08 / 01 / 2015
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	50.00	16049.88
()		
(ii) Unitemized	, 271.00	26748.60
(iii) TOTAL (add		40700.40
Lines 11(a)(i) and (ii)	321.00	42798.48
(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		40700.40
Totals to Line 33, page 5)	321.00	42798.48
2. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	7 7 7
3. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	7 7 7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds		· · · · · · · · · · · · · · · · · · ·
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Louis Funda (franc Ochodula 115)	0.00	0.00
(b) Levin Funds (from Schedule H5)	/7. /7. /*	7 7 7 0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
0. Total Receipts (add Lines 11(d),	204.00	40700 40
12, 13, 14, 15, 16, 17, and 18(c))▶	321.00	42798.48
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	321.00	42798.4

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.0
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	718.78	5322.58
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 	718.78	5322.5
Transfers to Affiliated/Other Party		
Committees Contributions to Federal Candidates/Committees	0.00	0.00
and Other Political Committees	2000.00	11000.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.0
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(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	0.0
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))►	0.00	0.00
Other Disbursements	910.00	11735.00
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
		0.00
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	
With Federal Funds	0.00	0.0
Lines 30(a)(i), 30(a)(ii) and 30(b))►	0.00	0.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	3628.78	20057 5
	3020.70	28057.5
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	3628.78	28057.58

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DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Total Contributions (other than loans) (from Line 11(d), page 3)	321.00	42798.48
. Total Contribution Refunds (from Line 28(d))	0.00	0.00
. Net Contributions (other than loans) (subtract Line 34 from Line 33)	321.00	42798.48
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	718.78	5322.58
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	718.78	5322.58

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 0F 10 (check only one) I1a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Illinois Political Active Letter Car	riers		
Α.				Date of Receipt
	Mailing Address 106 E Jefferson St <u>61</u> City	State	Zip Code	08 01 2015 Transaction ID : SA11AI.14570
	Shorewood	IL	60431	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer USPS	Occupation Letter Carri		Contribution
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 800.00	
в.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address			
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
<u>с</u> .	Full Name (Last, First, Middle Initial)			Date of Receipt
0.	Mailing Address			
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation	I	
	Receipt For: Primary General Other (specify) V		Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)			50.00

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

- J -

50.00

S	CHEDULE B (FEC Form 3X)			F	OR	LINF N	NE NUMBER: PAGE 7 OF 10										
IT	EMIZED DISBURSEMENTS	Use sep		hec	k only	one)		-									
		for each category of the Detailed Summary Page			×	21b 27	22 28a		23 28b		24 28c	25 29	26 30b				
	y information copied from such Reports and Stater for commercial purposes, other than using the nar																
\setminus	NAME OF COMMITTEE (In Full)																
	Illinois Political Active Letter Carrie	ers															
_	Full Name (Last, First, Middle Initial)																
Α.	17th District Committee						Date of	t Di									
	Mailing Address POB 3164						08 / D1 / Y1Y1Y1Y 2015										
	5	State	Zip Code				Trans	acti	ion ID	· SI	B21B.1	4575					
	Rock Island	IL	61204				Transaction ID : SB21B.14575										
	Purpose of Disbursement Printing			—			Amoun	t of	Each	Disl	bursem	nent this	s Period				
	Candidate Name			Cate	egoi	ry/							00.00				
	17th District Committee				ype				7	_	7	3	00.00				
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General														
	State: IL District:																
в.	Full Name (Last, First, Middle Initial) AT & T						Date of	f Di	sburse	emer	nt						
	Mailing Address Bill Payment Center						08 / D D / Y Y Y Y 2015										
	Saginaw	State WI	Zip Code 48663				Transaction ID : SB21B.14574										
	Purpose of Disbursement Computer Access				-		Amoun	t of	Fach	Diel	hurson	ont this	Period				
	Candidate Name						, anour		Luon	213	Surgen	rsement this Period					
	Illinois Political Active Letter Carrie	ers		Cate T	egoi ype				,		97.87						
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General		<u>, , , , , , , , , , , , , , , , , , , </u>				,		,						
_	State: District:																
C.	Full Name (Last, First, Middle Initial)						Date of	f Di									
	Mailing Address Bill Payment Center						м м 08	/	D 1	4	/ Ч	2015	Y				
	Saginaw	State WI	Zip Code 48663				Trans	sact	ion ID) : SI	B21B.1	4587					
	Purpose of Disbursement Computer Access						Amount of Each Disbursement this Period										
	Candidate Name Illinois Political Active Letter Carrie	ors		Cate	egoi ype				97.87								
	Office Sought: House Disburser Senate President State: District:	2016 General ccify) ▼		урс	, 			7		7							
s	UBTOTAL of Disbursements This Page (optional)											4	95.74				
⊢	OTAL This Period (last page this line number only)										7						

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	CHEDULE B (FEC Form 3X)		apparate appadula(a)				E NUMBER: PAGE 8 OF 10									
IT	EMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the	(c		k only 21b	one) 22		23		24		25	26		
		Detailed S	Summary Page			27	28a		28b		28c		29	30b		
	y information copied from such Reports and Staten for commercial purposes, other than using the name															
\square	NAME OF COMMITTEE (In Full)															
	Illinois Political Active Letter Carrie	rs														
Α.	Full Name (Last, First, Middle Initial)						Date of	of Di	sburse	emen	t					
	Mailing Address Bill Payment Center		08 / D D / Y Y Y Y 08 14 2015													
	City Saginaw	State WI	Zip Code 48663				Tran	sact	ion ID	: SB	821B. ⁻	14588	8			
	Purpose of Disbursement Fax Line		40000				Amou	at of	Fach	Dich	urcon	oont t	thic [Poriod		
	Candidate Name			0.04			Amou		Lacii	DISU	uisei		u 115 r	enou		
	Illinois Political Active Letter Carrier	rs		Cate T	egoi ype						- 7 -		27	.00		
	Senate X President	nent For: 2 Primary Other (spec	General													
	State: District: Full Name (Last, First, Middle Initial)															
В.	АТ & Т						Date				t					
	Mailing Address Bill Payment Center						08			4	/ Y	20 ⁻	15	Y		
	Saginaw	State WI	Zip Code 48663				Tran	sact	ion ID) : SE	321B.	14589	9			
	Purpose of Disbursement Cell Phone						Amou	nt of	Each	Disb	ursen	nent t	this F	Period		
	Candidate Name			Cate	egoi	ry/	74 6							.22		
	Illinois Political Active Letter Carrie Office Sought: House Disbursen	rs nent For: 2	040	Ţ	ype			-	7	_	7		- 17			
	Senate	Primary Other (spec	General													
	State: District:															
c.	Full Name (Last, First, Middle Initial)						Date of	of Di	sburse	emen	t					
	Mailing Address						M	/ /	D	D	/ Y	Y	Y	Y		
	City	State	Zip Code													
	Purpose of Disbursement			_						.						
	Candidate Name		Cate	egoi ype		Amou	nt of	Each	Disb	oursen	nent 1	this F	Period			
	President	nent For: Primary Other (spec	General ify) ▼													
_	State: District:															
s	UBTOTAL of Disbursements This Page (optional)							_	3		3		101			
т	OTAL This Period (last page this line number only)					•			7	_	7		596	.96		

SCHEDULE B (FEC Form 3X)		FOR LINE		PAGE 9 OF	10									
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27		24 25 28c 29	26 30b									
Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may not be sold or use me and address of any politica	ed by any personal committee to	on for the purpose of so solicit contributions from	pliciting contribution m such committee.	าร									
NAME OF COMMITTEE (In Full) Illinois Political Active Letter Carrie	ers													
Full Name (Last, First, Middle Initial)														
A. LAHOOD FOR CONGRESS			Date of Disbursemen	nt / Y Y Y Y	1									
Mailing Address P.O. BOX 10735			08 02	2015										
City PEORIA	State Zip Code IL 61612		Transaction ID : SB23.14577											
Purpose of Disbursement Contribution			Amount of Each Dist	oursement this Per	riod									
		Category/		2000.00	n									
LAHOOD FOR CONGRESS Office Sought: Y House Disburse	ement For: 2016	Туре		2000.00	,									
	Primary General Other (specify)													
Full Name (Last, First, Middle Initial)														
В.			Date of Disbursemer											
Mailing Address			M M / D D											
City	State Zip Code													
Purpose of Disbursement			Amount of Each Dist	urcoment this Der	riad									
Candidate Name		Category/ Type	Amount of Each Disc		iou									
Senate President	ement For: Primary General Other (specify) ▼	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	,										
State: District: Full Name (Last, First, Middle Initial)														
C.			Date of Disbursemer	nt										
Mailing Address														
City	State Zip Code													
Purpose of Disbursement														
Candidate Name	Category/ Type	Amount of Each Disbursement this Period												
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) V													
					_									
SUBTOTAL of Disbursements This Page (optional).		····· ►		2000.00)									
TOTAL This Period (last page this line number only	/)	••••••		2000.00)									

	CHEDULE B (FEC Form 3X)				NE NUMBER: PAGE 10 OF 10													
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(cł	necl		nly one) b - 22 - 23 - 24 - 25												
		Detailed Sum				21b 27		22 28a	_	23 28b	+	24 28c	×	25 29	26 30b			
	y information copied from such Reports and Stater for commercial purposes, other than using the nan					persc	n for	the		pose		soliciti	ng cor	ntribu	tions			
\backslash	NAME OF COMMITTEE (In Full)																	
	Illinois Political Active Letter Carrie	rs																
Α.	Full Name (Last, First, Middle Initial) John Bradley						Da	ate o	f Di	sburs	em	nent						
	Mailing Address P.O. Drawer 488						N	08	/	D	14)15	Y			
	City S Marion		Code				т	rans	sact	ion ID):	SB29.1	4596					
	Purpose of Disbursement	IL 02	.959			_	Amount of Each Disbursement this Period											
	Ticket Purchase																	
	Candidate Name			Cate		ry/	- Г				7			250	0.00			
	John Bradley Office Sought: House Disburser	nent For: 2016		Ту	/pe			-	-	7	-							
		Primary Other (specify)	General															
	Full Name (Last, First, Middle Initial)																	
В.	DEMOCRATIC PARTY OF ILLINC	DIS					_	ate o	_	sburse		_	VV	Y	V			
	Mailing Address PO BOX 518							08	ĺ		01)15				
	SPRINGFIELD		Code 2705				٦	Trans	sact	ion IE) :	SB29.	14576					
	Purpose of Disbursement Ticket Purchase						Amount of Each Disbursement this Period											
				Cate		ry/	. Г				1			300	0.00			
	DEMOCRATIC PARTY OF ILLINO			Ту	/pe			-	-	7	-			500				
	Senate	nent For: 2016 Primary Other (specify)	General															
	State: IL District:	Caller (opcolly)	•															
~	Full Name (Last, First, Middle Initial)						De	***	f Di	sburs	~ ~~	t						
С.	Kane County Democrats						_							Y	N.			
	Mailing Address POB 365						N	08		D	14			15	Y			
	City S North Aurora		o Code 1542				ſ	rans	sact	ion IC):	SB29.	14595					
	Purpose of Disbursement Tickets Purchase		_	-														
	Candidate Name			<u> </u>	-		An	noun	t of	Each	D	isburse	ement	this	Period			
	Kane County Democrats			Cate Ty	egor /pe	y/	360.00								0.00			
	Office Sought: House Disburser Senate President	General ▼																
_	State: District:										_							
s	UBTOTAL of Disbursements This Page (optional)					►				,				910	.00			
Т	OTAL This Period (last page this line number only)									,		,		910	.00			