

**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

CITIZENS FOR DONALD RAY RIENTS

ADDRESS (number and street) ▼

1968 COUNTY ROAD 2300 E

☐ Check if different than previously reported. (ACC)

BENSON

IL

61516

2. FEC IDENTIFICATION NUMBER ▼

C C00577122

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

IL

18

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  
07 07 2015

in the State of

IL

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
04 01 2015

through

M M / D D / Y Y Y Y  
06 17 2015

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 Mrs. Theresa Lynn Rients

Signature of Treasurer Mrs. Theresa Lynn Rients

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
06 24 2015

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 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 15

Write or Type Committee Name

CITIZENS FOR DONALD RAY RIENTS

Report Covering the Period:

From:

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

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 7 |   | 2 | 0 | 1 | 5 |

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                              | 3397.00                 | 3397.00                            |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 3397.00                 | 3397.00                            |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 6076.55                 | 6076.55                            |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....                                               | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 6076.55                 | 6076.55                            |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....                                              | -1928.12                |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 15

Write or Type Committee Name

CITIZENS FOR DONALD RAY RIENTS

Report Covering the Period:

From:

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

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 7 |   | 2 | 0 | 1 | 5 |

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

950.00

950.00

(ii) Unitemized.....

150.00

150.00

(iii) TOTAL of contributions from individuals ▶

1100.00

1100.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

2297.00

2297.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

3397.00

3397.00

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0.00

0.00

## 13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

## 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....

0.00

0.00

## 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

0.00

0.00

## 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

3397.00

3397.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 15

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 6076.55                       | 6076.55                            |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....                                                | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 6076.55                       | 6076.55                            |

## **III. CASH SUMMARY**

|                                                                                       |          |
|---------------------------------------------------------------------------------------|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 751.43   |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 3397.00  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 4148.43  |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 6076.55  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | -1928.12 |

# **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 5 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**mr Randy Ellis**

Mailing Address 426 E. Eureka Ave.

City

Eureka

State

IL

Zip Code

61530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Painter

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-Primary

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 07 2015

Transaction ID : SA11AI.4103

Amount of Each Receipt this Period

500.00

Contribution to campaign

Full Name (Last, First, Middle Initial)

**Mrs. Theresa Lynn Rients**

Mailing Address 1968 County Road 2300 E

City

Benson

State

IL

Zip Code

61516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Cosmetologist

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-Primary

Election Cycle-to-Date

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 26 2015

Transaction ID : SA11AI.4125

Amount of Each Receipt this Period

450.00

Contribution to Campaign

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

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

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

950.00

950.00

# **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 6 OF 15

|                              |                              |                              |                                         |                             |
|------------------------------|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                          | 14                                      |                             |

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**mr Donald Ray Rients**

Mailing Address 1968 County Road 2300 E

City

Benson

State

IL

Zip Code

61516

FEC ID number of contributing  
federal political committee.

**C** H6IL18138

Name of Employer  
State Farm Insurance

Occupation  
Technical Coordinator

Receipt For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

Election Cycle-to-Date

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2015

**Transaction ID : SA11D.4105**

Amount of Each Receipt this Period

200.00

Campaign donation

Full Name (Last, First, Middle Initial)

**mr Donald Ray Rients**

Mailing Address 1968 County Road 2300 E

City

Benson

State

IL

Zip Code

61516

FEC ID number of contributing  
federal political committee.

**C** H6IL18138

Name of Employer  
State Farm Insurance

Occupation  
Technical Coordinator

Receipt For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 06 / 2015

**Transaction ID : SA11D.4107**

Amount of Each Receipt this Period

200.00

Campaign donation

Full Name (Last, First, Middle Initial)

**Mr. Donald Ray Rients**

Mailing Address 1968 County Road 2300 E.

City

Benson

State

IL

Zip Code

61516

FEC ID number of contributing  
federal political committee.

**C** H6IL18138

Name of Employer  
State Farm Insurance

Occupation  
Technical Coordinator

Receipt For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 11 / 2015

**Transaction ID : SA11D.4115**

Amount of Each Receipt this Period

300.00

Contribution to Campaign

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

700.00

**TOTAL** 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 7 OF 15

☐ 11a ☐ 11b ☐ 11c ☒ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**Mr. Donald Ray Rients**

Mailing Address 1968 County Road 2300 E.

City

Benson

State

IL

Zip Code

61516

FEC ID number of contributing  
federal political committee.

**C** H6IL18138

Name of Employer  
State Farm Insurance

Occupation  
Technical Coordinator

Receipt For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

Election Cycle-to-Date

300.00

Date of Receipt

**05** / **11** / **2015**

**Transaction ID : SA11D.4119**

Amount of Each Receipt this Period

300.00

Contribution to Campaign

Full Name (Last, First, Middle Initial)

**mr Donald Ray Rients**

Mailing Address 1968 County Road 2300 E

City

Benson

State

IL

Zip Code

61516

FEC ID number of contributing  
federal political committee.

**C** H6IL18138

Name of Employer  
State Farm Insurance

Occupation  
Technical Coordinator

Receipt For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

Election Cycle-to-Date

900.00

Date of Receipt

**05** / **15** / **2015**

**Transaction ID : SA11D.4121**

Amount of Each Receipt this Period

500.00

Contribution to Campaign

Full Name (Last, First, Middle Initial)

**mr Donald Ray Rients**

Mailing Address 1968 County Road 2300 E

City

Benson

State

IL

Zip Code

61516

FEC ID number of contributing  
federal political committee.

**C** H6IL18138

Name of Employer  
State Farm Insurance

Occupation  
Technical Coordinator

Receipt For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

Election Cycle-to-Date

1197.00

Date of Receipt

**05** / **26** / **2015**

**Transaction ID : SA11D.4122**

Amount of Each Receipt this Period

297.00

Contribution to Campaign

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

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

1097.00

# **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

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**mr Donald Ray Rients**

Mailing Address 1968 County Road 2300 E

City

Benson

State

IL

Zip Code

61516

FEC ID number of contributing  
federal political committee.

**C** H6IL18138

Name of Employer  
State Farm Insurance

Occupation  
Technical Coordinator

Receipt For: 2015

☐ Primary

☐ General

☒ Other (specify)

Special-Primary

Election Cycle-to-Date

1697.00

Date of Receipt

**06** / **04** / **2015**

**Transaction ID : SA11D.4192**

Amount of Each Receipt this Period

500.00

Contribution to campaign

Full Name (Last, First, Middle Initial)

**B.**  
Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

**06** / **04** / **2015**

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**  
Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

**06** / **04** / **2015**

Amount of Each Receipt this Period

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

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

500.00

2297.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 15

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**A. Labor Ready**

Mailing Address 1608 Northbrook Dr #101

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 18  |   | 2015    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Normal | IL    | 61761    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2708.55 |
|---------|

Purpose of Disbursement  
Hired people to help get signatures

001

Transaction ID : SB17.4229

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**B. Labor Ready**

Mailing Address 1608 Northbrook Dr #101

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2015    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Normal | IL    | 61761    |

Amount of Each Disbursement this Period

|       |
|-------|
| 16.48 |
|-------|

Purpose of Disbursement  
Final payment for hired people

001

Transaction ID : SB17.4234

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**c. Office Max**

Mailing Address 1500 E Empire

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 01  |   | 2015    |

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Bloomington | IL    | 61701    |

Amount of Each Disbursement this Period

|        |
|--------|
| 236.92 |
|--------|

Purpose of Disbursement  
clipboards, pens

006

Transaction ID : SB17.4209

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2961.95

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 15

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**A. Office Max**

Mailing Address 1500 E Empire

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 05  |   | 2015    |

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Bloomington | IL    | 61701    |

Amount of Each Disbursement this Period

|        |
|--------|
| 126.66 |
|--------|

Purpose of Disbursement  
Ink, business cards, pensCategory/  
Type

Transaction ID : SB17.4210

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**B. Office Max**

Mailing Address 1500 E Empire

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  |   | 15  |   | 2015    |

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Bloomington | IL    | 61701    |

Amount of Each Disbursement this Period

|       |
|-------|
| 31.23 |
|-------|

Purpose of Disbursement  
2 hole punch, clipboardCategory/  
Type

Transaction ID : SB17.4224

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**C. Office Max**

Mailing Address 1500 E Empire

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 18  |   | 2015    |

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Bloomington | IL    | 61701    |

Amount of Each Disbursement this Period

|       |
|-------|
| 11.84 |
|-------|

Purpose of Disbursement  
Don's Name TagCategory/  
Type

Transaction ID : SB17.4170

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

169.73

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 15

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**A. Sam's Club**

Mailing Address 2151 Shepard rd.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 06  |   | 2015    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Normal | IL    | 61761    |

Amount of Each Disbursement this Period

|        |
|--------|
| 180.35 |
|--------|

Purpose of Disbursement  
Candy for Parades, printing paper, envelopes, printer ink

006

Transaction ID : SB17.4133

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**B. Sam's Club**

Mailing Address 2151 Shepard rd.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 18  |   | 2015    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Normal | IL    | 61761    |

Amount of Each Disbursement this Period

|       |
|-------|
| 57.72 |
|-------|

Purpose of Disbursement  
Candy for Parades

006

Transaction ID : SB17.4137

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**c. Sam's Club**

Mailing Address 2151 Shepard rd.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 08  |   | 2015    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Normal | IL    | 61761    |

Amount of Each Disbursement this Period

|       |
|-------|
| 19.87 |
|-------|

Purpose of Disbursement  
Envelopes and printing paper

006

Transaction ID : SB17.4140

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

257.94

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 15

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**A. Sam's Club**

Mailing Address 2151 Shepard rd.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 12  |   | 2015    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Normal | IL    | 61761    |

Amount of Each Disbursement this Period

|       |
|-------|
| 79.86 |
|-------|

Purpose of Disbursement  
candy for Tremont parade

006

Transaction ID : SB17.4149

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**B. silkworm Incorporated**

Mailing Address 102 Sezmore Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 21  |   | 2015    |

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Murphysboro | IL    | 62966    |

Amount of Each Disbursement this Period

|        |
|--------|
| 311.34 |
|--------|

Purpose of Disbursement  
Campaign Tee Shirts

004

Transaction ID : SB17.4177

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**C. silkworm Incorporated**

Mailing Address 102 Sezmore Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 03  |   | 2015    |

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Murphysboro | IL    | 62966    |

Amount of Each Disbursement this Period

|        |
|--------|
| 283.60 |
|--------|

Purpose of Disbursement  
Pencils to hand out at parades

004

Transaction ID : SB17.4186

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

674.80

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**A. silkworm Incorporated**

Mailing Address 102 Sezmore Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 03  |   | 2015    |

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Murphysboro | IL    | 62966    |

Purpose of Disbursement  
Campaign yard signs

004

Amount of Each Disbursement this Period

|   |   |   |   |   |
|---|---|---|---|---|
| 7 | 9 | 6 | 4 | 9 |
|---|---|---|---|---|

Transaction ID : SB17.4187

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**B. United States Postal Service**

Mailing Address 160 West 5th Street,

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 15  |   | 2015    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Minonk | IL    | 61760    |

Purpose of Disbursement  
10 books of postage stamps

006

Amount of Each Disbursement this Period

|   |   |   |   |
|---|---|---|---|
| 9 | 8 | 0 | 0 |
|---|---|---|---|

Transaction ID : SB17.4165

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**c. United States Postal Service**

Mailing Address 160 West 5th Street,

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 26  |   | 2015    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Minonk | IL    | 61760    |

Purpose of Disbursement  
10 books of postage stamps

006

Amount of Each Disbursement this Period

|   |   |   |   |
|---|---|---|---|
| 9 | 8 | 0 | 0 |
|---|---|---|---|

Transaction ID : SB17.4166

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

792.49

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 15

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address 160 West 5th Street,

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 03  |   | 2015    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Minonk | IL    | 61760    |

Amount of Each Disbursement this Period

|       |
|-------|
| 98.00 |
|-------|

Purpose of Disbursement  
10 books postage stamps

006

Transaction ID : SB17.4167

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**B. United States Postal Service**

Mailing Address 160 West 5th Street,

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 15  |   | 2015    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Minonk | IL    | 61760    |

Amount of Each Disbursement this Period

|       |
|-------|
| 98.00 |
|-------|

Purpose of Disbursement  
10 books of postage stamps

006

Transaction ID : SB17.4168

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Full Name (Last, First, Middle Initial)

**c. Vista Print**

Mailing Address 95 Hayden Avenue

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  |   | 12  |   | 2015    |

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Lexington | MA    | 02421    |

Amount of Each Disbursement this Period

|        |
|--------|
| 214.91 |
|--------|

Purpose of Disbursement  
Pens with advertisement

004

Transaction ID : SB17.4160

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

410.91

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 15

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**CITIZENS FOR DONALD RAY RIENTS**

Full Name (Last, First, Middle Initial)

**A. Vista Print**

Mailing Address 95 Hayden Avenue

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Lexington | MA    | 02421    |

Purpose of Disbursement  
Business Cards

004

Category/  
Type

Candidate Name

**CITIZENS FOR DONALD RAY RIENTS**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) Special-Primary

State: IL District: 18

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 15  |   | 2015    |

Amount of Each Disbursement this Period

|       |
|-------|
| 63.72 |
|-------|

Transaction ID : SB17.4159

**B.**

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|      |       |          |

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

**C.**

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|      |       |          |

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

63.72

5331.54