

# FEC FORM 3X

# 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, type over the lines. 12FE4M5

Illinois Political Active Letter Carriers

ADDRESS (number and street) P.O. Box 561

Check if different than previously reported. (ACC) Orland Park IL 60462

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00264689

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
  - Convention (12C)  Special (12S)

Election on 11 / 06 / 2012 in the State of IL

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on / / in the State of

5. Covering Period 10 / 01 / 2012 through 10 / 17 / 2012

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 Mr. Jack Heniff

Signature of Treasurer Mr. Jack Heniff [Electronically Filed] Date 10 / 17 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Illinois Political Active Letter Carriers**

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="2012"/>		84493.00
(b) Cash on Hand at Beginning of Reporting Period.....	81029.42	
(c) Total Receipts (from Line 19) .....	1216.50	45340.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	82245.92	129833.50
7. Total Disbursements (from Line 31).....	8403.69	55991.27
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	73842.23	73842.23
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Illinois Political Active Letter Carriers**

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).....	150.00	14965.00
(ii) Unitemized .....	1066.50	30375.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1216.50	45340.50
(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) .....	1216.50	45340.50
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))..... ▶	1216.50	45340.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1216.50	45340.50

**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 .....	503.69	7191.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	503.69	7191.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	27500.00
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 .....	5900.00	21300.10
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)) ..	8403.69	55991.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8403.69	55991.27

**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) .....	1216.50	45340.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1216.50	45340.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	503.69	7191.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	503.69	7191.17

**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 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Illinois Political Active Letter Carriers**

**A. David Colegrove**  
Full Name (Last, First, Middle Initial)

Mailing Address 106 E Jefferson St  
61

City Shorewood State IL Zip Code 60431

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

Name of Employer USPS Occupation Letter Carrier

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
10 / 04 / 2012  
Transaction ID : SA11AI.12851

Amount of Each Receipt this Period  
50.00

Contribution

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

Mailing Address 326 Moultrie Dr

City Belleville State IL Zip Code 62222

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

Name of Employer USPS Occupation Letter Carrier

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
10 / 15 / 2012  
Transaction ID : SA11AI.12874

Amount of Each Receipt this Period  
50.00

Contribution

**C. Robert Henrichs**  
Full Name (Last, First, Middle Initial)

Mailing Address 326 Moultrie Ln

City Ofallon State IL Zip Code 62269

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

Name of Employer USPS Occupation Letter Carrier

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
10 / 15 / 2012  
Transaction ID : SA11AI.12875

Amount of Each Receipt this Period  
50.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	150.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial)

**A. AT & T**

Mailing Address Bill Payment Center

City State Zip Code  
Saginaw WI 48663

Purpose of Disbursement  
Telephone Fax

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 09 / 2012

**Transaction ID : SB21B.12836**

Amount of Each Disbursement this Period

23.17

Full Name (Last, First, Middle Initial)

**B. AT & T**

Mailing Address Bill Payment Center

City State Zip Code  
Saginaw WI 48663

Purpose of Disbursement  
Computer Access

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 11 / 2012

**Transaction ID : SB21B.12853**

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

**C. AT & T**

Mailing Address Bill Payment Center

City State Zip Code  
Saginaw WI 48663

Purpose of Disbursement  
Telephone

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 11 / 2012

**Transaction ID : SB21B.12855**

Amount of Each Disbursement this Period

52.08

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

150.25

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial)

**A. Joan's Trophy & Plaque Co.**

Mailing Address POB 5939

City Peoria State IL Zip Code 61601

Purpose of Disbursement  
Promotional Items

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : SB21B.12878**

Amount of Each Disbursement this Period

149.22

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 16189 S Harlem

City Tinley Park State IL Zip Code 60477

Purpose of Disbursement  
Office Supplies

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 09 / 2012

**Transaction ID : SB21B.12837**

Amount of Each Disbursement this Period

109.82

Full Name (Last, First, Middle Initial)

**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 Y Y

Amount of Each Disbursement this Period

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

259.04

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

409.29



**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial)

**A. LIPINSKI FOR CONGRESS COMMITTEE**

Mailing Address 1460 W. Ohio  
#2R

City CHICAGO State IL Zip Code 60622

Purpose of Disbursement  
Contribution

001

Candidate Name

**LIPINSKI FOR CONGRESS COMMITTEE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 03

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

**Transaction ID : SB23.12865**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. RUSH, BOBBY LEE**

Mailing Address 3534 SOUTH CALUMET AVE

City CHICAGO State IL Zip Code 60653

Purpose of Disbursement  
Contribution

Candidate Name

**RUSH, BOBBY LEE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

**Transaction ID : SB23.12857**

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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)..... ▶

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

2000.00

2000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial)

**A. 10th Congressional District Democrats**

Mailing Address P.O. Box 523

City State Zip Code  
Deerfield IL 60015

Purpose of Disbursement  
Ticket Purchase

Candidate Name  
**10th Congressional District Democrats**

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /   
10 / 17 / 2012

**Transaction ID : SB29.12880**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. 11th Congressional COPE District**

Mailing Address 1100 N-I-55 East Frontage Rd

City State Zip Code  
Joliet IL 60430

Purpose of Disbursement  
Ticket Purchase

Candidate Name  
**11th Congressional COPE District**

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /   
10 / 17 / 2012

**Transaction ID : SB29.12882**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Adams Bill Friends ofg**

Mailing Address 1237 Briarbrook Dr.  
#18

City State Zip Code  
Wheaton IL 60189

Purpose of Disbursement  
Contribution

Candidate Name  
**Adams Bill Friends ofg**

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /   
10 / 15 / 2012

**Transaction ID : SB29.12858**

Amount of Each Disbursement this Period

300.00

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

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

800.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial) <b>A. Jennifer Bertino Tarrant</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2012
Mailing Address 900 Plainfield Rd		<b>Transaction ID : SB29.12826</b>
City Joliet	State IL	
Zip Code 60435	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 300.00
Candidate Name <b>Jennifer Bertino Tarrant</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Bush Melinda, friends of</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2012
Mailing Address 240 No. Lake St.		<b>Transaction ID : SB29.12847</b>
City Grayslake	State IL	
Zip Code 60030	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 300.00
Candidate Name <b>Bush Melinda, friends of</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: IL District:	

Full Name (Last, First, Middle Initial) <b>C. Jackie Collins</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2012
Mailing Address POB 209054		<b>Transaction ID : SB29.12866</b>
City Chicago	State IL	
Zip Code 60620	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 500.00
Candidate Name <b>Jackie Collins</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: IL District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1100.00
<b>TOTAL</b> 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)  
**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial) <b>A. Franzen JoAnn Friends of</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2012
Mailing Address 6n705 Valley Rd		<b>Transaction ID : SB29.12885</b>
City Rosello	State IL	
Zip Code 60172	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 300.00
Candidate Name <b>Franzen JoAnn Friends of</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Friends of Larry Walsh Jr.</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2012
Mailing Address P.O. Box 69		<b>Transaction ID : SB29.12821</b>
City Elwood	State IL	
Zip Code 60421	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 300.00
Candidate Name <b>Friends of Larry Walsh Jr.</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: IL District:	

Full Name (Last, First, Middle Initial) <b>C. Kennedy Chris Citizens for</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2012
Mailing Address P.O. Box 312		<b>Transaction ID : SB29.12830</b>
City Lake Bluff	State IL	
Zip Code 60044	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 300.00
Candidate Name <b>Kennedy Chris Citizens for</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	900.00
<b>TOTAL</b> 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)  
**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial)

**A. Kifouit Stephanie Friends of**

Mailing Address POB 1414

City Aurora State IL Zip Code 60507

Purpose of Disbursement  
Contribution

Candidate Name

**Kifouit Stephanie Friends of**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB29.12884**

Amount of Each Disbursement this Period

**B. Manley Natalie Friends of**

Full Name (Last, First, Middle Initial)

Mailing Address 3107 Ingalls  
3A

City Joliet State IL Zip Code 60455

Purpose of Disbursement  
Contribution

Candidate Name

**Manley Natalie Friends of**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB29.12827**

Amount of Each Disbursement this Period

**C. Moylan Marty Friends of**

Full Name (Last, First, Middle Initial)

Mailing Address 1659 Oakton St

City DesPlaines State IL Zip Code 60018

Purpose of Disbursement  
Contribution

Candidate Name

**Moylan Marty Friends of**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

**Transaction ID : SB29.12822**

Amount of Each Disbursement this Period

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

**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)  
**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial)

**A. Nekritz Elaine Citizens for**

Mailing Address P.O. Box 2563

City State Zip Code  
Glenview IL 60025

Purpose of Disbursement  
Contribution

Candidate Name

**Nekritz Elaine Citizens for**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2012

**Transaction ID : SB29.12833**

Amount of Each Disbursement this Period

300.00
--------

Full Name (Last, First, Middle Initial)

**B. Pierog Corinne Committee to Elect**

Mailing Address P.O. Box 3501

City State Zip Code  
St. Charles IL 60174

Purpose of Disbursement  
Contribution

Candidate Name

**Pierog Corinne Committee to Elect**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2012

**Transaction ID : SB29.12844**

Amount of Each Disbursement this Period

400.00
--------

Full Name (Last, First, Middle Initial)

**C. Walsh Lawrence Committeeto Elect**

Mailing Address P.O. Box 86

City State Zip Code  
Elwood IL 60421

Purpose of Disbursement  
Contribution

Candidate Name

**Walsh Lawrence Committeeto Elect**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2012

**Transaction ID : SB29.12825**

Amount of Each Disbursement this Period

300.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial)

**A. Will County Democrats**

Mailing Address POB 4242

City Joliet State IL Zip Code 60434

Purpose of Disbursement  
Ticket Purchase

Candidate Name  
**Will County Democrats**

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : SB29.12879**

Amount of Each Disbursement this Period

500.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Willis Kathleen Friends to Elect**

Mailing Address 1329 W. Irving Park Rd.

City Bensenville State IL Zip Code 60106

Purpose of Disbursement  
Contribution

Candidate Name  
**Willis Kathleen Friends to Elect**

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

**Transaction ID : SB29.12861**

Amount of Each Disbursement this Period

300.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

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 Y Y

Amount of Each Disbursement this Period

Category/  
Type

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

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

800.00

5900.00