

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
GOP Generation Y Fund

ADDRESS (number and street) PO Box 9055
Check if different than previously reported. (ACC) Peoria IL 61612

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00448191
3. IS THIS REPORT NEW OR AMENDED
[X] NEW (N) [ ] AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), 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)
(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 07 / 01 / 2011 through 12 / 31 / 2011

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 Steven Shearer

Signature of Treasurer Steven Shearer [Electronically Filed] Date 01 / 26 / 2011

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)

Write or Type Committee Name

**GOP Generation Y Fund**

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="2011"/>		8161.11
(b) Cash on Hand at Beginning of Reporting Period.....	9978.87	
(c) Total Receipts (from Line 19) .....	135894.57	224182.67
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	145873.44	232343.78
7. Total Disbursements (from Line 31).....	95869.26	182339.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	50004.18	50004.18
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

**GOP Generation Y Fund**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 07 / 01 / 2011 To: M M / D D / Y Y Y Y Y Y 12 / 31 / 2011

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).....	1000.00	1000.00
(ii) Unitemized .....	0.00	5000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1000.00	6000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	14000.00	75000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	15000.00	81000.00
12. Transfers From Affiliated/Other Party Committees.....	120846.87	143062.87
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).....	47.70	119.80
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))..... ▶	135894.57	224182.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	135894.57	224182.67

**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 .....	21869.26	67339.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	21869.26	67339.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	74000.00	94000.00
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	5000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	10000.00
29. Other Disbursements .....	0.00	11000.00
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)) ..	95869.26	182339.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	95869.26	182339.60

**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) .....	15000.00	81000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	10000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15000.00	71000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	21869.26	67339.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	47.70	119.80
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	21821.56	67219.80

# 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 41
<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)  
**GOP Generation Y Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Charles Carey**

Mailing Address 61 Summersweet Lane

City New Canaan	State CT	Zip Code 06840
--------------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : SA11AI.4939**

Amount of Each Receipt this Period  
1000.00

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

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

**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 7 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**GOP Generation Y Fund**

**A. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 S. Akard Street  
 Suite 3521  
 City Dallas State TX Zip Code 75202  
 FEC ID number of contributing federal political committee. **C** C00109017  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2011  
**Transaction ID : SA11C.4929**  
 Amount of Each Receipt this Period  
 2500.00

**B. CATERPILLAR INC. EMPLOYEE POLITICAL ACTION COMMITTEE, THE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 N.E. Adams  
 City Peoria State IL Zip Code 61629  
 FEC ID number of contributing federal political committee. **C** C00148031  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2011  
**Transaction ID : SA11C.4915**  
 Amount of Each Receipt this Period  
 5000.00

**C. INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 412 First Street, SE, Suite 300  
 City Washington State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00022343  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2011  
**Transaction ID : SA11C.4958**  
 Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> 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 8 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)  
**A. REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address C/O G&W 2201 WISCONSIN AVE., NW  
SUITE 320

City WASHINGTON State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2011

**Transaction ID : SA11C.4819**

Amount of Each Receipt this Period  
1500.00

Full Name (Last, First, Middle Initial)  
**B. TUESDAY GROUP POLITICAL ACTION COMMITTEE**

Mailing Address P. O. Box 11586

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C** C00433060

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 22 / 2011

**Transaction ID : SA11C.4882**

Amount of Each Receipt this Period  
2500.00

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	14000.00



**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 9 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)  
**A. Schock Victory Committee**

Mailing Address 264 N Lumpkin St, #202

City Athens State GA Zip Code 30601

FEC ID number of contributing federal political committee. **C** C00469395

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
115205.61

Date of Receipt  
09 / 23 / 2011  
**Transaction ID : SA12.4842**

Amount of Each Receipt this Period  
92989.61

Transfer of Net JFC Funds

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

Mailing Address 200 S Wacker Dr Ste 4000

City Chicago State IL Zip Code 60606

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

Name of Employer Occupation  
GCG Partners Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
04 / 25 / 2011  
**Transaction ID : SA12.4842.0**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**

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

Mailing Address 228 S Beach Rd

City Hobe Sound State FL Zip Code 33455

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

Name of Employer Occupation  
None Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
06 / 29 / 2011  
**Transaction ID : SA12.4842.1**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92989.61
<b>TOTAL</b> 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 10 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)  
**A. Mary McCormack**

Mailing Address 228 S Beach Rd

City Hobe Sound State FL Zip Code 33455

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2011  
**Transaction ID : SA12.4842.2**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**

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

Mailing Address 1650 Dublin Ct

City Inverness State IL Zip Code 60067

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

Name of Employer Madison Dearborn Partners Occupation Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 08 / 2011  
**Transaction ID : SA12.4842.3**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**C. Justin Hopkins**

Mailing Address 1470 N Main St

City East Peoria State IL Zip Code 61611

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

Name of Employer Trucking Center Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2011  
**Transaction ID : SA12.4842.4**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> 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 11 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

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

Mailing Address 65 E Groethe St Apt 3N

City Chicago State IL Zip Code 60610

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

Name of Employer Harris Associates, LP Occupation Investment Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 18 / 2011  
**Transaction ID : SA12.4842.5**

Amount of Each Receipt this Period 5000.00

**[MEMO ITEM]**

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

Mailing Address 602 E Poplet Hollow Rd

City Peoria State IL Zip Code 61615

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

Name of Employer Marquis Management Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 22 / 2011  
**Transaction ID : SA12.4842.6**

Amount of Each Receipt this Period 5000.00

**[MEMO ITEM]**

**C. Brenda Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 7406 N Edgewild Dr

City Peoria State IL Zip Code 61614

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

Name of Employer Adv. Correctional Healthcare Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 24 / 2011  
**Transaction ID : SA12.4842.7**

Amount of Each Receipt this Period 5000.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

**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 12 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial) <b>A. Norman Johnson</b>		Date of Receipt MM / DD / YYYY 08 / 24 / 2011 <b>Transaction ID : SA12.4842.8</b>
Mailing Address 7406 N Edgewild Dr		Amount of Each Receipt this Period 5000.00
City Peoria	State IL	Zip Code 61614
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer Adv. Correctional Healthcare	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Delores Blaudow</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2011 <b>Transaction ID : SA12.4842.9</b>
Mailing Address PO Box 510965		Amount of Each Receipt this Period 5000.00
City Key Colony Beach	State FL	Zip Code 33051
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer None	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. John Hopkins</b>		Date of Receipt MM / DD / YYYY 08 / 30 / 2011 <b>Transaction ID : SA12.4842.10</b>
Mailing Address 38 Country Mdws		Amount of Each Receipt this Period 5000.00
City Edwardsville	State IL	Zip Code 62025
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer Truck Centers Inc	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> 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 13 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial) <b>A. Philip McCully</b>		Date of Receipt MM / DD / YYYY 08 / 30 / 2011 <b>Transaction ID : SA12.4842.11</b>
Mailing Address PO Box 97		Amount of Each Receipt this Period 607.40
City Toluca	State IL	Zip Code 61369
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer Philip McCully & Associates	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 607.40	

Full Name (Last, First, Middle Initial) <b>B. Michael Dalton</b>		Date of Receipt MM / DD / YYYY 09 / 02 / 2011 <b>Transaction ID : SA12.4842.12</b>
Mailing Address 8300 N Allen Rd		Amount of Each Receipt this Period 5000.00
City Peoria	State IL	Zip Code 61615
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer Maui Jim	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Leroy G. Hagenbuch</b>		Date of Receipt MM / DD / YYYY 09 / 02 / 2011 <b>Transaction ID : SA12.4842.13</b>
Mailing Address 1425 E. Glen Avenue		Amount of Each Receipt this Period 5000.00
City Peoria Heights	State IL	Zip Code 61616
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer Philippi-Hagenbuch, Inc.	Occupation Co-Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> 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 14 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

**A. Mrs. Patricia A. Hagenbuch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1425 E. Glen Avenue  
 City Peoria Heights State IL Zip Code 61616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Philippi-Hagenbuch, Inc. Occupation Co-Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2011  
**Transaction ID : SA12.4842.14**  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**

**B. Jonathan Michael**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9025 N Lindbergh Dr  
 City Peoria State IL Zip Code 61615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RLI Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2011  
**Transaction ID : SA12.4842.15**  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**

**C. Mrs. Sharon Michael**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9025 N Lindbergh Dr  
 City Peoria State IL Zip Code 61615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Proctor Addiction Recovery Occupation Nurse  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2011  
**Transaction ID : SA12.4842.16**  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> 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 15 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

**A. Rita Kress**  
Full Name (Last, First, Middle Initial)  
Mailing Address 16600 W Brimfield Jubilee Rd  
City Peoria State IL Zip Code 61615  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Kress Corp. Occupation President  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 08 / 2011  
Transaction ID : SA12.4842.17  
Amount of Each Receipt this Period 5000.00  
[MEMO ITEM]

**B. Mrs. Elizabeth Stone**  
Full Name (Last, First, Middle Initial)  
Mailing Address 142 W Detweiller Dr  
City Peoria State IL Zip Code 61615  
FEC ID number of contributing federal political committee. **C**  
Name of Employer WES Lending Occupation Mortgage Broker  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 09 / 2011  
Transaction ID : SA12.4842.18  
Amount of Each Receipt this Period 5000.00  
[MEMO ITEM]

**C. Michael J. Stone**  
Full Name (Last, First, Middle Initial)  
Mailing Address 142 Detweiller Dr.  
City Peoria State IL Zip Code 61615  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RLI Occupation Insurance  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 09 / 2011  
Transaction ID : SA12.4842.19  
Amount of Each Receipt this Period 5000.00  
[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**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 16 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial) <b>A. Kevin Breheny</b>		Date of Receipt
Mailing Address 847 Jasons Way		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
City Forsyth	State IL	Zip Code 62535
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.4842.20</b>
Name of Employer JL Hubbard Insurance		Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="2500.00"/>
		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. Gerald D. Stephens</b>		Date of Receipt
Mailing Address 493 E High Point Dr		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
City Peoria	State IL	Zip Code 61614
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.4842.21</b>
Name of Employer RLI Corp		Occupation Chariman
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. Mrs. Helen Stephens</b>		Date of Receipt
Mailing Address 493 E High Point Dr		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
City Peoria	State IL	Zip Code 61614
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.4842.22</b>
Name of Employer None		Occupation Homemaker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> 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: (check only one)	PAGE 17 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

**A. Barry MacLean**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1000 Alanson Rd  
City Mundelein State IL Zip Code 60060  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MacLean-Fogg Occupation CEO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 15 / 2011  
**Transaction ID : SA12.4842.23**  
Amount of Each Receipt this Period 5000.00  
**[MEMO ITEM]**

**B. Mary Ann MacLean**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1000 Alanson Rd  
City Mundelein State IL Zip Code 60060  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 15 / 2011  
**Transaction ID : SA12.4842.24**  
Amount of Each Receipt this Period 5000.00  
**[MEMO ITEM]**

**C. Schock Victory Committee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 264 N Lumpkin St, #202  
City Athens State GA Zip Code 30601  
FEC ID number of contributing federal political committee. **C** C00469395  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 143062.87

Date of Receipt 12 / 31 / 2011  
**Transaction ID : SA12.4941**  
Amount of Each Receipt this Period 27857.26  
Transfer of Net JFC Funds

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 27857.26  
**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 18 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

**A. Kathy Arkwell**  
Full Name (Last, First, Middle Initial)

Mailing Address 11204 N Oakwood Dr

City Peoria State LA Zip Code 61615

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

Name of Employer Self Employed Occupation Orthodontist

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  
10 / 26 / 2011  
**Transaction ID : SA12.4941.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

**B. Jean Ann Honegger**  
Full Name (Last, First, Middle Initial)

Mailing Address 930 E Polk St

City Morton State IL Zip Code 61550

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

Name of Employer Morton Community Bank Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 15 / 2011  
**Transaction ID : SA12.4941.1**

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**

**C. William Morton**  
Full Name (Last, First, Middle Initial)

Mailing Address 2660 N Morton Ave

City Morton State IL Zip Code 61550

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

Name of Employer Morton Development Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 15 / 2011  
**Transaction ID : SA12.4941.2**

Amount of Each Receipt this Period  
3500.00

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> 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 19 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

**A. Gordon Honegger**  
Full Name (Last, First, Middle Initial)

Mailing Address 930 E Polk St

City Morton State IL Zip Code 61550

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

Name of Employer Morton Community Bank Occupation Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2011  
**Transaction ID : SA12.4941.3**

Amount of Each Receipt this Period  
 5000.00

**[MEMO ITEM]**

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

Mailing Address 2660 N Morton Ave

City Morton State IL Zip Code 61550

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

Name of Employer Morton Development Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 22 / 2011  
**Transaction ID : SA12.4941.4**

Amount of Each Receipt this Period  
 1500.00

**[MEMO ITEM]**

**C. Morie Silverman**  
Full Name (Last, First, Middle Initial)

Mailing Address 765 Sheridan Rd

City Winnetka State IL Zip Code 60093

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

Name of Employer MSM Corp Occupation Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2011  
**Transaction ID : SA12.4941.5**

Amount of Each Receipt this Period  
 5000.00

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> 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 20 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**GOP Generation Y Fund**

**A. Jeff Brincat**  
Full Name (Last, First, Middle Initial)

Mailing Address 620 Lake Rd

City Lake Forest State IL Zip Code 60045

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

Name of Employer Consumer Financial Services Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2011  
**Transaction ID : SA12.4941.6**

Amount of Each Receipt this Period  
 2500.00

**[MEMO ITEM]**

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

Mailing Address 209 E Lake Shore Dr 15E

City Chicago State IL Zip Code 60611

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

Name of Employer The Duchossois Group Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2011  
**Transaction ID : SA12.4941.7**

Amount of Each Receipt this Period  
 5000.00

**[MEMO ITEM]**

**C. Janet Duchossois**  
Full Name (Last, First, Middle Initial)

Mailing Address 209 E Lake Shore Dr 15E

City Chicago State IL Zip Code 60611

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

Name of Employer None Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2011  
**Transaction ID : SA12.4941.8**

Amount of Each Receipt this Period  
 5000.00

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	120846.87

**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)  
**GOP Generation Y Fund**

**A. American Express**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
PAC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 05 / 2011

**Transaction ID : SB21B.4825**

Amount of Each Disbursement this Period: 7.95

Category/Type: 001

**B. American Express**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
PAC Expenses (See Memo Entries)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 13 / 2011

**Transaction ID : SB21B.4798**

Amount of Each Disbursement this Period: 2144.94

Category/Type: 001

**C. Deer Path Inn**

Full Name (Last, First, Middle Initial)  
Mailing Address 255 E. Illinois Rd

City Lake Forest State IL Zip Code 60045

Purpose of Disbursement  
PAC Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 13 / 2011

**Transaction ID : SB21B.4798.0**

Amount of Each Disbursement this Period: 369.30

Category/Type: 001

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2152.89

**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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. Corduroy**

Mailing Address 1122 9th St NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
PAC Meeting Expense

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 13 / 2011

Transaction ID : SB21B.4798.1

Amount of Each Disbursement this Period

400.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Trust for the National Mall**

Mailing Address PO Box 96475

City Washington State DC Zip Code 20090

Purpose of Disbursement  
PAC Event Ticket

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 13 / 2011

Transaction ID : SB21B.4798.3

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
PAC Airfare

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 13 / 2011

Transaction ID : SB21B.4798.4

Amount of Each Disbursement this Period

562.40

[MEMO ITEM]

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

0.00

**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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
PAC Transaction Fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4829**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
PAC Expenses (See Memo Entries)

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4822**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
PAC Airfare

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4822.0**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

**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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
PAC Expenses (See Memo Entries)

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 06 / 2011

**Transaction ID : SB21B.4830**

Amount of Each Disbursement this Period

2834.69

Full Name (Last, First, Middle Initial)

**B. The Palm Restaurant**

Mailing Address 1225 19th St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
PAC Event Catering

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 06 / 2011

**Transaction ID : SB21B.4830.0**

Amount of Each Disbursement this Period

507.63

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. SEI Restaurant**

Mailing Address 444 7th St NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
PAC Event Catering

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 06 / 2011

**Transaction ID : SB21B.4830.1**

Amount of Each Disbursement this Period

318.50

**[MEMO ITEM]**

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

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

2834.69



**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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. BLT Steak**

Mailing Address 1625 Eye St

City Washington State DC Zip Code 20005

Purpose of Disbursement  
PAC Event Catering

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4830.2**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CAA Tickets**

Mailing Address 3310 West End Ave

City Nashville State TN Zip Code 37203

Purpose of Disbursement  
PAC Event Tickets

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4830.3**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
PAC Transaction Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4911**

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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
PAC Expenses (See Memo Entries)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4908**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Elysian Hotel**

Mailing Address 11 E. Walton St

City Chicago State IL Zip Code 60611

Purpose of Disbursement  
PAC Travel Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4908.0**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
PAC Expenses (See Memo Entries)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4922**

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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. Graham Elliot**

Mailing Address 217 W Huron St #1

City Chicago State IL Zip Code 60654

Purpose of Disbursement  
PAC Event Catering

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4922.0**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. House Gift Shop**

Mailing Address US Capitol

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC Gifts

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4922.1**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
PAC Expenses (See Memo Entries)

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4933**

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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. CAA Tickets**

Mailing Address 3310 West End Ave

City Nashville State TN Zip Code 37203

Purpose of Disbursement  
PAC Event Tickets

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4933.0**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Garmin**

Mailing Address 633 N Michigan Ave

City Chicago State IL Zip Code 60611

Purpose of Disbursement  
PAC Computer Equipment

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4933.1**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
PAC Expenses (See Memo Entries)

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4966**

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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. Kinthead's**

Mailing Address 2000 Pennsylvania Ave NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
PAC Meeting Expense

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		0	1	2		2	0	1	1	1	1

**Transaction ID : SB21B.4966.1**

Amount of Each Disbursement this Period

2	7	7	.	5	5
---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. The Capital Grille**

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
PAC Meeting Expense

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		0	1	2		2	0	1	1	1	1

**Transaction ID : SB21B.4966.2**

Amount of Each Disbursement this Period

8	2	3	.	4	0
---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Fiola**

Mailing Address 601 Pennsylvania Ave NW, #125

City Washington State DC Zip Code 20004

Purpose of Disbursement  
PAC Meeting Expense

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		0	1	2		2	0	1	1	1	1

**Transaction ID : SB21B.4966.3**

Amount of Each Disbursement this Period

2	1	8	.	5	2
---	---	---	---	---	---

**[MEMO ITEM]**

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

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

0	0	0
---	---	---

0	0	0
---	---	---

**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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
PAC Airfare

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4966.5**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
PAC Airfare

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4966.8**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Trump Hotel**

Mailing Address 401 N Wabash Ave

City Chicago State IL Zip Code 60611

Purpose of Disbursement  
PAC Lodging

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4966.9**

Amount of Each Disbursement this Period

[MEMO ITEM]

**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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. Peninsula Hotel**

Mailing Address 108 E Superior St

City Chicago State IL Zip Code 60611

Purpose of Disbursement  
PAC Lodging

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4966.10**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Caryn Eggeraat**

Mailing Address 3701 Connecticut Ave NW, #404

City Washington State DC Zip Code 20008

Purpose of Disbursement  
PAC Fundraising Consulting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4782**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Kimbia, Inc.**

Mailing Address 1050 E 11th St, Ste 200

City Austin State TX Zip Code 78702

Purpose of Disbursement  
PAC Web Hosting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.4783**

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 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)

**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. Kimbia, Inc.**

Mailing Address 1050 E 11th St, Ste 200

City Austin State TX Zip Code 78702

Purpose of Disbursement  
PAC Web Hosting

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2011

**Transaction ID : SB21B.4821**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Kimbia, Inc.**

Mailing Address 1050 E 11th St, Ste 200

City Austin State TX Zip Code 78702

Purpose of Disbursement  
PAC Web Hosting

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2011

**Transaction ID : SB21B.4914**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Professional Data Services, Inc.**

Mailing Address 264 N Lumpkin St, #202

City Athens State GA Zip Code 30601

Purpose of Disbursement  
PAC Administration

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2011

**Transaction ID : SB21B.4827**

Amount of Each Disbursement this Period

500.00

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

700.00

**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 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)  
**GOP Generation Y Fund**

**A. Sangamon County Republican Central Committee**

Full Name (Last, First, Middle Initial)

Mailing Address 1132 Sangamon Ave

City Springfield State IL Zip Code 62702

Purpose of Disbursement PAC Event Ticket

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2011

**Transaction ID : SB21B.4818**

Amount of Each Disbursement this Period: 1000.00

Category/Type: 001

**B.**

Full Name (Last, First, Middle Initial)

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:

Amount of Each Disbursement this Period:

Category/Type:

**C.**

Full Name (Last, First, Middle Initial)

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:

Amount of Each Disbursement this Period:

Category/Type:

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	21677.61

**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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. BENISHEK FOR CONGRESS**

Mailing Address 802 Pentoga Trail

City State Zip Code  
Crystal Falls MI 49920

Purpose of Disbursement  
Contribution

011

Candidate Name

**DANIEL J BENISHEK**

Category/  
Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2011

Transaction ID : **SB23.5021**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. BILL JOHNSON FOR CONGRESS COMMITTEE**

Mailing Address 3755 HUNTERS HILL

City State Zip Code  
POLAND OH 44514

Purpose of Disbursement  
Contribution

011

Candidate Name

**BILL JOHNSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 06

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2011

Transaction ID : **SB23.4896**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BOBBY SCHILLING FOR CONGRESS**

Mailing Address 367 AVENUE OF THE CITIES SUITE D

City State Zip Code  
EAST MOLINE IL 61244

Purpose of Disbursement  
Contribution

011

Candidate Name

**ROBERT TODD SCHILLING**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 17

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2011

Transaction ID : **SB23.4906**

Amount of Each Disbursement this Period

5000.00

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

8000.00

**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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial) <b>A. Citizens for Frank Ierulli</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2011
Mailing Address 227 Illinois St		<b>Transaction ID : SB23.5007</b>
City Brimfield	State IL	
Purpose of Disbursement Contribution	Candidate Name	Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Citizens for Mike Unes</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2011
Mailing Address PO Box 8171		<b>Transaction ID : SB23.5002</b>
City East Peoria	State IL	
Purpose of Disbursement Contribution	Candidate Name	Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Citizens for Pat Sullivan</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2011
Mailing Address PO Box 385		<b>Transaction ID : SB23.5009</b>
City Peoria	State IL	
Purpose of Disbursement Contribution	Candidate Name	Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. COFFMAN FOR CONGRESS 2012**

Mailing Address 9249 SOUTH BROADWAY #200-501

City State Zip Code  
HIGHLANDS RANCH CO 80129

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CO District: 06

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2011

Transaction ID : SB23.4992

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. DENHAM FOR CONGRESS**

Mailing Address 2150 RIVER PLAZA DR #150

City State Zip Code  
SACRAMENTO CA 95833

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 19

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2011

Transaction ID : SB23.4888

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. DOLD FOR CONGRESS**

Mailing Address PO Box 8145

City State Zip Code  
Northfield IL 60093

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

**ROBERT JAMES DOLD JR**

Office Sought:  House  
 Senate  
 President  
State: IL District: 10

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2011

Transaction ID : SB23.4904

Amount of Each Disbursement this Period

5000.00

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

11000.00

**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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. DUFFY FOR CONGRESS**

Mailing Address PO BOX 186

City Ashland State WI Zip Code 54806

Purpose of Disbursement  
Contribution

011

Candidate Name  
**SEAN P DUFFY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WI District: 07

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2011

Transaction ID : **SB23.4917**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF SCOTT DESJARLAIS**

Mailing Address PO BOX 311

City JASPER State TN Zip Code 37347

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TN District: 04

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 15 / 2011

Transaction ID : **SB23.4999**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF TIM JOHNSON**

Mailing Address PO BOX 17097

City URBANA State IL Zip Code 61803

Purpose of Disbursement  
Contribution

011

Candidate Name  
**TIM JOHNSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 15

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 15 / 2011

Transaction ID : **SB23.5020**

Amount of Each Disbursement this Period

5000.00

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

12000.00

**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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

### A. GIBBS FOR CONGRESS

Mailing Address 6992 TR 466

City LAKEVILLE State OH Zip Code 44638

Purpose of Disbursement  
Contribution

011

Candidate Name  
**ROBERT BRIAN GIBBS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 18

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2011

Transaction ID : SB23.4892

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

### B. ILLINOIS REPUBLICAN PARTY

Mailing Address P.O. Box 64897

City Chicago State IL Zip Code 60664

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		29		2011

Transaction ID : SB23.5000

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

### C. JIM RENACCI FOR CONGRESS

Mailing Address 150 SMOKERISE DRIVE

City WADSWORTH State OH Zip Code 44281

Purpose of Disbursement  
Contribution

011

Candidate Name  
**JAMES B RENACCI**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OH District: 16

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2011

Transaction ID : SB23.4897

Amount of Each Disbursement this Period

1000.00
---------

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

7000.00
---------

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

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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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. JON RUNYAN FOR CONGRESS, INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2011

Mailing Address PO BOX 225

**Transaction ID : SB23.4901**

City State Zip Code  
COLONIA NJ 07067

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name

**JON RUNYAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NJ District: 03

Full Name (Last, First, Middle Initial)

**B. JUDY BIGGERT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2011

Mailing Address P.O. BOX 637

**Transaction ID : SB23.4884**

City State Zip Code  
HINSDALE IL 60522

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name

**JUDY BIGGERT**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 13

Full Name (Last, First, Middle Initial)

**C. KINZINGER FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2011

Mailing Address PO BOX 1050

**Transaction ID : SB23.4883**

City State Zip Code  
Bourbonnais IL 60914

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name

**ADAM KINZINGER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 11

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

7000.00
---------

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

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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 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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. MICHAEL GRIMM FOR CONGRESS**

Mailing Address 560 9th Street

City State Zip Code  
Brooklyn NY 11215

Purpose of Disbursement  
Contribution

011

Candidate Name

**MICHAEL GRIMM**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	1

Transaction ID : **SB23.4895**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. MICHAEL GRIMM FOR CONGRESS**

Mailing Address 560 9th Street

City State Zip Code  
Brooklyn NY 11215

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	1

Transaction ID : **SB23.5012**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. MICHAEL GRIMM FOR CONGRESS**

Mailing Address 560 9th Street

City State Zip Code  
Brooklyn NY 11215

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	1

Transaction ID : **SB23.5013**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

6	0	0	0	0	0	0	0	0	0

6	0	0	0	0	0	0	0	0	0



**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)  
**GOP Generation Y Fund**

Full Name (Last, First, Middle Initial)

**A. RANDY HULTGREN FOR CONGRESS**

Mailing Address P.O. BOX 39

City BATAVIA State IL Zip Code 60510

Purpose of Disbursement Contribution

011

Candidate Name

**RANDY HULTGREN**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: IL District: 14

Date of Disbursement

MM / DD / YYYY  
12 / 06 / 2011

Transaction ID : **SB23.4965**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. SANDY ADAMS FOR CONGRESS**

Mailing Address PO BOX 1566

City ORLANDO State FL Zip Code 32802

Purpose of Disbursement Contribution

011

Candidate Name

**SANDY ADAMS**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: FL District: 24

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2011

Transaction ID : **SB23.5022**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. SCOTT RIGELL FOR CONGRESS**

Mailing Address 915 First Colonial Road Suite 100

City Virginia Beach State VA Zip Code 23454

Purpose of Disbursement Contribution

011

Candidate Name

**EDWARD SCOTT RIGELL**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: VA District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2011

Transaction ID : **SB23.4900**

Amount of Each Disbursement this Period

1000.00

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

8000.00

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

74000.00