

# 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  
DEMOCRATIC PARTY OF ILLINOIS

ADDRESS (number and street) P.O. BOX 518  
Check if different than previously reported. (ACC) SPRINGFIELD IL 62705

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00167015 3. IS THIS REPORT NEW (N) OR AMENDED (A)  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 M M M / D D D / Y Y Y Y Y Y in the State of  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 11 / 25 / 2014 through 12 / 31 / 2014

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 Michael Kasper

Signature of Treasurer Michael Kasper [Electronically Filed] Date 06 / 29 / 2015

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**DEMOCRATIC PARTY OF ILLINOIS**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		763467.65
(b) Cash on Hand at Beginning of Reporting Period.....	1204849.84	
(c) Total Receipts (from Line 19) .....	627040.39	6130323.63
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1831890.23	6893791.28
7. Total Disbursements (from Line 31).....	112335.96	5174237.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1719554.27	1719554.27
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)

Page 3

Write or Type Committee Name

**DEMOCRATIC PARTY OF ILLINOIS**

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 25 / 2014 To: M M / D D / Y Y Y Y 12 / 31 / 2014

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).....	7250.00	628844.00
(ii) Unitemized .....	70.00	11563.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7320.00	640407.00
(b) Political Party Committees .....	19362.60	76317.07
(c) Other Political Committees (such as PACs).....	36500.43	3125036.37
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	63183.03	3841760.44
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	15750.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	39000.00	461250.13
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	64496.87	568300.11
(b) Levin Funds (from Schedule H5) .....	460360.49	1243262.95
(c) Total Transfers (add 18(a) and 18(b))..	524857.36	1811563.06
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	627040.39	6130323.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	102183.03	4318760.57

**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 .....	13454.31	148793.49
(ii) Non-Federal Share.....	50613.87	559747.20
(b) Other Federal Operating Expenditures .....	11160.43	41320.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	75228.61	749860.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	334444.02
(ii) "Levin" Share.....	0.00	1258146.54
(b) Federal Election Activity Paid Entirely With Federal Funds .....	37107.35	2831785.67
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	37107.35	4424376.23
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	112335.96	5174237.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61722.09	3356343.27

**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) .....	63183.03	3841760.44
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	63183.03	3841760.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	24614.74	190113.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	15750.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24614.74	174363.58

**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 51
	<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	

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)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. Michael McClaiou**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 Tuscany Drive

City Quincy State IL Zip Code 62305

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

Name of Employer IRMA Occupation Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 25 / 2014  
**Transaction ID : SA11AI.36861**

Amount of Each Receipt this Period 1000.00

Contribution

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

Mailing Address 11310 W. 72nd Street

City Burr Ridge State IL Zip Code 60527

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

Name of Employer Commonwealth Edison Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 25 / 2014  
**Transaction ID : SA11AI.36864**

Amount of Each Receipt this Period 250.00

Contribution

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

Mailing Address 1695 Ashbury Drive

City Lemont State IL Zip Code 60439

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

Name of Employer Commonwealth Edison Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 25 / 2014  
**Transaction ID : SA11AI.36870**

Amount of Each Receipt this Period 1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

**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: PAGE 7 OF 51  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. Mark Triffler**  
Full Name (Last, First, Middle Initial)  
Mailing Address 32 Ruffled Feather Drive  
City Lemon State IL Zip Code 60439  
FEC ID number of contributing federal political committee. **C**  
Name of Employer S4 Group Occupation Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 25 / 2014  
**Transaction ID : SA11AI.36872**  
Amount of Each Receipt this Period 5000.00  
Contribution

**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  
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  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7250.00

**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 8 OF 51
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)  
**A. DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Mailing Address 430 SOUTH CAPITOL STREET SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00460147

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32434.09

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
11	/	25	/	2014

**Transaction ID : SA11B.36860**

Amount of Each Receipt this Period  
4840.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Mailing Address 430 SOUTH CAPITOL STREET SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00460147

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
42116.69

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
12	/	23	/	2014

**Transaction ID : SA11B.36902**

Amount of Each Receipt this Period  
9682.60

Contribution

Full Name (Last, First, Middle Initial)  
**C. DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT**

Mailing Address 430 SOUTH CAPITOL STREET SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00460147

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
46956.69

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
12	/	30	/	2014

**Transaction ID : SA11B.36903**

Amount of Each Receipt this Period  
4840.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	19362.60
<b>TOTAL</b> This Period (last page this line number only).....▶	19362.60

**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 51
<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)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)  
**A. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street, S.E. #2

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2832664.52

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2014

**Transaction ID : SA11C.36912**

Amount of Each Receipt this Period  
23910.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street, S.E. #2

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2840541.59

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2014

**Transaction ID : SA11C.37525**

Amount of Each Receipt this Period  
7877.07

In-kind - cover services and equipment

Full Name (Last, First, Middle Initial)  
**C. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street, S.E. #2

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2840971.59

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2014

**Transaction ID : SA11C.36885**

Amount of Each Receipt this Period  
430.00

Travel reimbursement

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32217.07
<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 51
<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)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial) <b>A. HOYER FOR CONGRESS</b>		Date of Receipt
Mailing Address 700 13TH STREET, NW SUITE 600		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20005
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00140715"/>	<b>Transaction ID : SA11C.37531</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="2247.91"/>
Receipt For:	Aggregate Year-to-Date ▼	In-kind - Travel
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="13483.67"/>	

Full Name (Last, First, Middle Initial) <b>B. HOYER FOR CONGRESS</b>		Date of Receipt
Mailing Address 700 13TH STREET, NW SUITE 600		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20005
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00140715"/>	<b>Transaction ID : SA11C.37533</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="137.22"/>
Receipt For:	Aggregate Year-to-Date ▼	In-kind - Travel
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="13620.89"/>	

Full Name (Last, First, Middle Initial) <b>C. NANCY PELOSI FOR CONGRESS</b>		Date of Receipt
Mailing Address 700 13TH STREET, NW SUITE 600		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20005
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00213512"/>	<b>Transaction ID : SA11C.37527</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="722.20"/>
Receipt For:	Aggregate Year-to-Date ▼	In-kind - Travel
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="15722.20"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="3107.33"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 51
<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)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. NANCY PELOSI FOR CONGRESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 13TH STREET, NW  
 SUITE 600  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00213512  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 15898.23

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2014  
**Transaction ID : SA11C.37529**  
 Amount of Each Receipt this Period  
 176.03  
 In-kind - Travel

**B. NARRAGANSETT BAY PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 8628  
 City CRANSTON State RI Zip Code 02920  
 FEC ID number of contributing federal political committee. **C** C00403592  
 Name of Employer Occupation  
 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  
 11 / 25 / 2014  
**Transaction ID : SA11C.36862**  
 Amount of Each Receipt this Period  
 1000.00  
 Contribution

**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).....▶	1176.03
<b>TOTAL</b> This Period (last page this line number only).....▶	36500.43

**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 51
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. 13th Ward Democratic Organization**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6500 South Pulaski  
 City Chicago State IL Zip Code 60629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2014  
**Transaction ID : SA17.36886**  
 Amount of Each Receipt this Period  
 750.00  
 Voter file

**B. 17th Ward Democratic Organization**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7811 S. Racine  
 City Chicago State IL Zip Code 60620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2014  
**Transaction ID : SA17.36906**  
 Amount of Each Receipt this Period  
 750.00  
 Voter file

**C. 19th Ward Democratic Organization**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10444 S. Western Avenue  
 City Chicago State IL Zip Code 60643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2014  
**Transaction ID : SA17.36887**  
 Amount of Each Receipt this Period  
 750.00  
 Voter file

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2250.00
<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 51
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. 8th Ward Democratic Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8539 S. Cotage Grove  
 City Chicago State IL Zip Code 60619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2014  
**Transaction ID : SA17.36905**  
 Amount of Each Receipt this Period  
 750.00  
 Voter file

**B. Calumet Township Democratic Organization**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2030 High St  
 City Blue Island State IL Zip Code 60406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2014  
**Transaction ID : SA17.36890**  
 Amount of Each Receipt this Period  
 500.00  
 Voter file

**C. Chicago Forward**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 W. Lake Street  
 City Chicago State IL Zip Code 60606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2014  
**Transaction ID : SA17.36891**  
 Amount of Each Receipt this Period  
 10000.00  
 Voter file

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11250.00
<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 51
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. Citizens for Heather Sattler**

Full Name (Last, First, Middle Initial)  
Mailing Address 5501 W. Cullom

City Chicago	State IL	Zip Code 60641
-----------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2014

**Transaction ID : SA17.36898**

Amount of Each Receipt this Period  

750.00
--------

Voter file

**B. Citizens for Maldonado**

Full Name (Last, First, Middle Initial)  
Mailing Address 1731 North Troy Street

City Chicago	State IL	Zip Code 60647
-----------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2014

**Transaction ID : SA17.36909**

Amount of Each Receipt this Period  

750.00
--------

Voter file

**C. Citizens to Elect David Moore**

Full Name (Last, First, Middle Initial)  
Mailing Address 8042 S. Kedzie Street

City Chicago	State IL	Zip Code 60652
-----------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2014

**Transaction ID : SA17.36893**

Amount of Each Receipt this Period  

750.00
--------

Voter file

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2250.00</b>
<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 51
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. Committee to Elect Robert J. Lovero**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6536 W. Cermak  
 City Berwyn State IL Zip Code 60402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2014  
**Transaction ID : SA17.36908**  
 Amount of Each Receipt this Period  
 750.00  
 Voter file

**B. Committee to Elect Stacey Pfungsten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 14034  
 City Chicago State IL Zip Code 60614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2014  
**Transaction ID : SA17.36878**  
 Amount of Each Receipt this Period  
 750.00  
 Voter file

**C. Friends of Alderman Ray Suarez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4502 W. Fullerton Avenue  
 City Chicago State IL Zip Code 60639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2014  
**Transaction ID : SA17.36882**  
 Amount of Each Receipt this Period  
 750.00  
 Voter file

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<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: PAGE 16 OF 51  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)  
**A. Friends of Alyx Pattison**

Mailing Address 1111 N. Western Avenue

City Chicago State IL Zip Code 60622

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2014  
**Transaction ID : SA17.36896**

Amount of Each Receipt this Period  
**750.00**

Voter file

Full Name (Last, First, Middle Initial)  
**B. Friends of Joann Thompson**

Mailing Address 5335 S. Western Boulevard

City Chicago State IL Zip Code 60609

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2014  
**Transaction ID : SA17.36910**

Amount of Each Receipt this Period  
**750.00**

Voter file

Full Name (Last, First, Middle Initial)  
**C. Friends of Mike Zalewski**

Mailing Address 5838 S. Archer Avenue

City Chicago State IL Zip Code 60638

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2014  
**Transaction ID : SA17.36884**

Amount of Each Receipt this Period  
**750.00**

Voter file

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **2250.00**

**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 18 OF 51
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. NANCY PELOSI FOR CONGRESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 13TH STREET, NW  
 SUITE 600  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00213512  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2014  
**Transaction ID : SA17.36866**  
 Amount of Each Receipt this Period  
 5000.00  
 Unlimited transfer

**B. NANCY PELOSI FOR CONGRESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 13TH STREET, NW  
 SUITE 600  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00213512  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2014  
**Transaction ID : SA17.36868**  
 Amount of Each Receipt this Period  
 5000.00  
 Unlimited transfer

**C. NANCY PELOSI FOR CONGRESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 13TH STREET, NW  
 SUITE 600  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00213512  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2014  
**Transaction ID : SA17.36869**  
 Amount of Each Receipt this Period  
 5000.00  
 Unlimited transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<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: PAGE 19 OF 51  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)  
**A. Niles Township Democrats**

Mailing Address 4119 Maion Street

City State Zip Code  
Skokie IL 60076

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : SA17.36895**

Amount of Each Receipt this Period

Voter file

Full Name (Last, First, Middle Initial)  
**B. Patrick Daley Thompson Campaign Committee**

Mailing Address 20 S. Clark Street

City State Zip Code  
Chicago IL 60603

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : SA17.36880**

Amount of Each Receipt this Period

Voter file

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="39000.00"/>

**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)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street, S.E. #2

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-kind - cover services and equipment

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
11			25			2014			

**Transaction ID : SB21B.37526**

Amount of Each Disbursement this Period

7877.07
---------

Full Name (Last, First, Middle Initial)

**B. HOYER FOR CONGRESS**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
In-kind - Travel

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
11			25			2014			

**Transaction ID : SB21B.37532**

Amount of Each Disbursement this Period

2247.91
---------

Full Name (Last, First, Middle Initial)

**C. HOYER FOR CONGRESS**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
In-kind - Travel

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
11			25			2014			

**Transaction ID : SB21B.37534**

Amount of Each Disbursement this Period

137.22
--------

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

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

10262.20
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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 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)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. NANCY PELOSI FOR CONGRESS**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
In-kind - Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2014

**Transaction ID : SB21B.37528**

Amount of Each Disbursement this Period

722.20

Full Name (Last, First, Middle Initial)

**B. NANCY PELOSI FOR CONGRESS**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
In-kind - Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2014

**Transaction ID : SB21B.37530**

Amount of Each Disbursement this Period

176.03

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D 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)..... ▶

898.23

11160.43

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address Union Station-W.Washington Street

City Springfield State IL Zip Code 62704

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2014

Transaction ID : SB30B.36934

Amount of Each Disbursement this Period

84.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Expedia Services**

Mailing Address 3150 139th Avenue

City Bellevue State WA Zip Code 98005

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 20 / 2014

Transaction ID : SB30B.36971

Amount of Each Disbursement this Period

429.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Illinois Department of Revenue**

Mailing Address Department of Revenue

City Springfield State IL Zip Code 62704

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2014

Transaction ID : SB30B.36967

Amount of Each Disbursement this Period

273.96

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

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

273.96

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Illinois Department of Revenue**

Mailing Address Department of Revenue

City Springfield State IL Zip Code 62704

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
12 / 30 / 2014

Transaction ID : SB30B.36992

Amount of Each Disbursement this Period

93.75

Full Name (Last, First, Middle Initial)

**B. Illinois State Board of Elections**

Mailing Address 2329 S. MacArthur

City Springfield State IL Zip Code 62704

Purpose of Disbursement  
Voter file

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
12 / 03 / 2014

Transaction ID : SB30B.36928

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Internal Revenue Service**

Mailing Address Department of the Treasury

City Kansas City State MO Zip Code 64999

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
11 / 28 / 2014

Transaction ID : SB30B.36922

Amount of Each Disbursement this Period

1815.96

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

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

2409.71

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Internal Revenue Service**

Mailing Address Department of the Treasury

City Kansas City State MO Zip Code 64999

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2014

**Transaction ID : SB30B.36966**

Amount of Each Disbursement this Period

1815.93

Full Name (Last, First, Middle Initial)

**B. Internal Revenue Service**

Mailing Address Department of the Treasury

City Kansas City State MO Zip Code 64999

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2014

**Transaction ID : SB30B.36991**

Amount of Each Disbursement this Period

559.54

Full Name (Last, First, Middle Initial)

**C. Elizabeth Jung**

Mailing Address 25 Kassebaum Lane

City Saint Louis State MO Zip Code 63129

Purpose of Disbursement  
See memo-UPS Store

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 03 / 2014

**Transaction ID : SB30B.36929**

Amount of Each Disbursement this Period

61.79

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

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

2437.26

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City Springfield State IL Zip Code 62711

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 28 / 2014

**Transaction ID : SB30B.36917**

Amount of Each Disbursement this Period

1274.22

Full Name (Last, First, Middle Initial)

**B. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City Springfield State IL Zip Code 62711

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 28 / 2014

**Transaction ID : SB30B.36921**

Amount of Each Disbursement this Period

312.81

Full Name (Last, First, Middle Initial)

**C. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City Springfield State IL Zip Code 62711

Purpose of Disbursement  
See memo-Amtrak and Mail Chump

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
12 / 03 / 2014

**Transaction ID : SB30B.36933**

Amount of Each Disbursement this Period

134.00

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

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

1721.03

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City Springfield State IL Zip Code 62711

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2014

**Transaction ID : SB30B.36949**

Amount of Each Disbursement this Period

1274.23

Full Name (Last, First, Middle Initial)

**B. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City Springfield State IL Zip Code 62711

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2014

**Transaction ID : SB30B.36987**

Amount of Each Disbursement this Period

1365.15

Full Name (Last, First, Middle Initial)

**C. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City Springfield State IL Zip Code 62711

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2014

**Transaction ID : SB30B.36990**

Amount of Each Disbursement this Period

312.81

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

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

2952.19

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City Springfield State IL Zip Code 62711

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2014

**Transaction ID : SB30B.36995**

Amount of Each Disbursement this Period

312.81

Full Name (Last, First, Middle Initial)

**B. Ben Lenet**

Mailing Address 1547 W. Blackhawk Avenue

City Chicago State IL Zip Code 60642

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 28 / 2014

**Transaction ID : SB30B.36918**

Amount of Each Disbursement this Period

2534.22

Full Name (Last, First, Middle Initial)

**C. Ben Lenet**

Mailing Address 1547 W. Blackhawk Avenue

City Chicago State IL Zip Code 60642

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2014

**Transaction ID : SB30B.36950**

Amount of Each Disbursement this Period

2534.21

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

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

5381.24

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Ben Lenet**

Mailing Address 1547 W. Blackhawk Avenue

City Chicago State IL Zip Code 60642

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.36953**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. MailChip**

Mailing Address 512 Means Street

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
Email

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.36936**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Christopher Maley**

Mailing Address 2517 W. Harbauer Lane

City Springfield State IL Zip Code 62702

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.36939**

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Micro Tek**

Mailing Address 24082 Network Place

City Chicago State IL Zip Code 60673

Purpose of Disbursement  
Voter File Training

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 24 / 2014

**Transaction ID : SB30B.36977**

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

**B. Russell Nagel**

Mailing Address 529 S. Glenwood Avenue

City Springfield State IL Zip Code 62704

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 03 / 2014

**Transaction ID : SB30B.36940**

Amount of Each Disbursement this Period

6728.33

Full Name (Last, First, Middle Initial)

**C. Amanda Taylor**

Mailing Address 1825 Florida

City Washington State DC Zip Code 20009

Purpose of Disbursement  
See Expendia memo

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2014

**Transaction ID : SB30B.36970**

Amount of Each Disbursement this Period

429.70

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

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

11658.03

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

### A. UPS Store

Mailing Address Tesson Ferry Road

City Saint Louis State MO Zip Code 63128

Purpose of Disbursement  
Printer Return Packaging

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2014			

Transaction ID : SB30B.36930

Amount of Each Disbursement this Period

61.79
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

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

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

0.00
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37107.35
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**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC PARTY OF ILLINOIS

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
DEMOCRATIC PARTY OF ILLINOIS	MM / DD / YYYY 12 / 12 / 2014	3387.60

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	0.00
<b>Transaction ID : H3.36901</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) 10-09-14 Event (ComEd) (10/09/2014)	3387.60
<b>Transaction ID : H3.36901.0</b>	
b) .....	
c) Total Amount Transferred For Direct Fundraising .....	3387.60
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Candidate Support .....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 DEMOCRATIC PARTY OF ILLINOIS

NAME OF ACCOUNT DEMOCRATIC PARTY OF ILLINOIS	DATE OF RECEIPT MM / DD / YYYY 12 / 22 / 2014	TOTAL AMOUNT TRANSFERRED 61109.27
---	---	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

i) <b>Total Administrative</b> .....	61109.27
<b>Transaction ID : H3.36900</b>	
ii) <b>Generic Voter Drive</b> .....	
iii) <b>Exempt Activities</b> .....	
iv) <b>Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
v) <b>Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) <b>Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	61109.27
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	3387.60
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	64496.87

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Form A: Powerplay Properties. Transaction ID: H4.36924. Allocated Activity or Event: Administrative. Date: 11/25/2014. Total Amount: 278.56.

Form B: TTI National. Transaction ID: H4.36913. Allocated Activity or Event: Administrative. Date: 11/26/2014. Total Amount: 18.97.

Form C: TTI National. Transaction ID: H4.36914. Allocated Activity or Event: Administrative. Date: 11/26/2014. Total Amount: 48.34.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 72.63, 273.24, 345.87.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Kenny and Kenny, P.C.</b> Mailing Address 1400 W. 47th Street		<b>Transaction ID : H4.36915</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code		Allocated Activity or Event Year-To-Date 442671.17	
La Grange	IL	60525		Date <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Bookkeeping Service			<input type="text"/>		
Activity or Event Identifier: Administrative					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1167.08"/>			<input type="text" value="4390.42"/>		<input type="text" value="5557.50"/>

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Powerplay Properties</b> Mailing Address 1201 Veterans Parkway		<b>Transaction ID : H4.36916</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code		Allocated Activity or Event Year-To-Date 442949.73	
Springfield	IL	62707		Date <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Rent			<input type="text"/>		
Activity or Event Identifier: Administrative					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="58.50"/>			<input type="text" value="220.06"/>		<input type="text" value="278.56"/>

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Citi Cards</b> Mailing Address Processing Center P.O. Box 688901		<b>Transaction ID : H4.36996</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City	State	Zip Code		Allocated Activity or Event Year-To-Date 444931.64	
Des Moines	IA	50363		Date <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Memo items to follow			<input type="text"/>		
Activity or Event Identifier: Administrative					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="416.20"/>			<input type="text" value="1565.71"/>		<input type="text" value="1981.91"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1641.78"/>		<input type="text" value="6176.19"/>		<input type="text" value="7817.97"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) <b>Sarah Nelson</b>		Transaction ID : <b>H4.36919</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 655 W. Irving Park Road Apt. 5015			Allocated Activity or Event Year-To-Date 445175.61	
City Chicago	State IL	Zip Code 60613	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Wages spent < 25% on fea		<input type="text"/>	Category/Type	
Activity or Event Identifier: <b>Administrative</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="51.23"/>			<input type="text" value="192.74"/>	<input type="text" value="243.97"/>

B. Full Name (Last, First, Middle Initial) <b>Emily Wurth</b>		Transaction ID : <b>H4.36920</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2267 Boysenberry Lane			Allocated Activity or Event Year-To-Date 445502.54	
City Springfield	State IL	Zip Code 62711	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Wages spent < 25% on fea		<input type="text"/>	Category/Type	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="68.66"/>			<input type="text" value="258.27"/>	<input type="text" value="326.93"/>

C. Full Name (Last, First, Middle Initial) <b>ADP</b>		Transaction ID : <b>H4.36926</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 842854			Allocated Activity or Event Year-To-Date 445792.69	
City Boston	State MA	Zip Code 02284	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll fee		<input type="text"/>	Category/Type	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="60.93"/>			<input type="text" value="229.22"/>	<input type="text" value="290.15"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="180.82"/>		<input type="text" value="680.23"/>		<input type="text" value="861.05"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.36947</b> <b>PNC Bank</b> Mailing Address P.O. Box 609		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City State Zip Code Pittsburgh PA 15230-9738		Allocated Activity or Event Year-To-Date 447438.38		
Purpose of Disbursement: Service charge		Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>		
Activity or Event Identifier: <b>Administrative</b>		Category/Type		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
345.59		1300.10		1645.69

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.36999</b> <b>Internal Revenue Service</b> Mailing Address Department of the Treasury		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City State Zip Code Kansas City MO 64999		Allocated Activity or Event Year-To-Date 447600.20		
Purpose of Disbursement: Payroll taxes-employees spent < 25% of time on FEA		Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>		
Activity or Event Identifier: Administrative		Category/Type		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.98		127.84		161.82

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.37000</b> <b>Illinois Department of Revenue</b> Mailing Address Department of Revenue		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
City State Zip Code Springfield IL 62704		Allocated Activity or Event Year-To-Date 447635.86		
Purpose of Disbursement: Payroll taxes-employees spent < 25% of time on FEA		Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>		
Activity or Event Identifier: Administrative		Category/Type		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.49		28.17		35.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
387.06		1456.11		1843.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.36927</b> <b>Clearfire</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 21 Estretta Way		Allocated Activity or Event Year-To-Date 447735.86	
City State Zip Code Novato CA 94945	Date 12 / 03 / 2014		Category/ Type
Purpose of Disbursement: Website updates	Allocated Activity or Event Year-To-Date 447735.86		
Activity or Event Identifier: <b>Administrative</b>		Date 12 / 03 / 2014	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
21.00 + 79.00 = 100.00			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.36932</b> <b>Nicor Gas</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 416		Allocated Activity or Event Year-To-Date 447958.25	
City State Zip Code Aurora IL 60568-0001	Date 12 / 03 / 2014		Category/ Type
Purpose of Disbursement: Utilities	Allocated Activity or Event Year-To-Date 447958.25		
Activity or Event Identifier: Administrative		Date 12 / 03 / 2014	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
46.70 + 175.69 = 222.39			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.36941</b> <b>Tim Mapes</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 632 Old Tippercanoe		Allocated Activity or Event Year-To-Date 463334.50	
City State Zip Code Springfield IL 62707	Date 12 / 03 / 2014		Category/ Type
Purpose of Disbursement: Wages spent < 25% on fea	Allocated Activity or Event Year-To-Date 463334.50		
Activity or Event Identifier: Administrative		Date 12 / 03 / 2014	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
3229.01 + 12147.24 = 15376.25			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3296.71		12401.93		15698.64

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) <b>Kathy Murray</b>		Transaction ID : <b>H4.36942</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 500 Wingate Drive			Allocated Activity or Event Year-To-Date 467281.69	
City Sherman	State IL	Zip Code 62684	Date 12 / 03 / 2014	
Purpose of Disbursement: Wages spent < 25% on fea				
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
828.91			3118.28	3947.19

B. Full Name (Last, First, Middle Initial) <b>Internal Revenue Service</b>		Transaction ID : <b>H4.36943</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Department of the Treasury			Allocated Activity or Event Year-To-Date 477649.50	
City Kansas City	State MO	Zip Code 64999	Date 12 / 03 / 2014	
Purpose of Disbursement: Payroll taxes-employees spent < 25% of time on FEA				
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
2177.24			8190.57	10367.81

C. Full Name (Last, First, Middle Initial) <b>Illinois Department of Revenue</b>		Transaction ID : <b>H4.36945</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Department of Revenue			Allocated Activity or Event Year-To-Date 479722.42	
City Springfield	State IL	Zip Code 62704	Date 12 / 03 / 2014	
Purpose of Disbursement: Payroll taxes-employees spent < 25% of time on FEA				
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
435.31			1637.61	2072.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3441.46		12946.46		16387.92

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.36946
Illinois Department of Revenue
Mailing Address Department of Revenue
City Springfield State IL Zip Code 62704
Purpose of Disbursement: Payroll taxes-employees spent < 25% of time on FEA
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 47996.38
Date 12 / 03 / 2014
FEDERAL SHARE 57.53 + NONFEDERAL SHARE 216.43 = TOTAL AMOUNT 273.96

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.36944
ADP
Mailing Address P.O. Box 842854
City Boston State MA Zip Code 02284
Purpose of Disbursement: Payroll fee
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 480072.94
Date 12 / 05 / 2014
FEDERAL SHARE 16.08 + NONFEDERAL SHARE 60.48 = TOTAL AMOUNT 76.56

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.36948
Capitol Storage, LLC
Mailing Address 2225 J. David Jones Parkway
City Springfield State IL Zip Code 62707
Purpose of Disbursement: Rent
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 481047.94
Date 12 / 05 / 2014
FEDERAL SHARE 204.75 + NONFEDERAL SHARE 770.25 = TOTAL AMOUNT 975.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 278.36, 1047.16, 1325.52

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [ ], [ ], [ ]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Form A: Sarah Nelson, Transaction ID: H4.36951. Allocated Activity or Event: Administrative. Purpose of Disbursement: Wages spent < 25% on fea. Activity or Event Identifier: Administrative. Date: 12/11/2014. Total Amount: 1495.05.

Form B: Emily Wurth, Transaction ID: H4.36952. Allocated Activity or Event: Administrative. Purpose of Disbursement: Wages spent < 25% on fea. Activity or Event Identifier: Administrative. Date: 12/11/2014. Total Amount: 1443.09.

Form C: Emily Wurth, Transaction ID: H4.36954. Allocated Activity or Event: Administrative. Purpose of Disbursement: Insurance employee spent < 25% on fea. Activity or Event Identifier: Administrative. Date: 12/11/2014. Total Amount: 352.14.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 690.96, 2599.32, 3290.28.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.36964</b> <b>Internal Revenue Service</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Department of the Treasury		Allocated Activity or Event Year-To-Date 485591.93	
City State Zip Code Kansas City MO 64999	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll taxes-employees spent < 25% of time on FEA		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 263.28 + 990.43 = 1253.71	
Activity or Event Identifier: <b>Administrative</b>			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.36965</b> <b>Illinois Department of Revenue</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Department of Revenue		Allocated Activity or Event Year-To-Date 485795.80	
City State Zip Code Springfield IL 62704	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll taxes-employees spent < 25% of time on FEA		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 42.81 + 161.06 = 203.87	
Activity or Event Identifier: Administrative			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.36955</b> <b>UPS</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Lockbox 577		Allocated Activity or Event Year-To-Date 485826.30	
City State Zip Code Carol Stream IL 60132-0577	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Shipping		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 6.40 + 24.10 = 30.50	
Activity or Event Identifier: Administrative			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
312.49		1175.59		1488.08

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.36958</b> <b>Perkins Coie</b> Mailing Address 607 Fourteenth Street N.W.		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Washington DC 20005		Allocated Activity or Event Year-To-Date 487706.96
Purpose of Disbursement: Legal		Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
Activity or Event Identifier: <b>Administrative</b>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 394.94 + 1485.72 = 1880.66		

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.36959</b> <b>Quill Corporation</b> Mailing Address P.O. Box 37600		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Philadelphia PA 19101		Allocated Activity or Event Year-To-Date 488175.10
Purpose of Disbursement: Office supplies		Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
Activity or Event Identifier: Administrative		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 98.31 + 369.83 = 468.14		

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.36960</b> <b>AT &amp; T-P.O. Box 5014 Carol Stream</b> Mailing Address P.O. Box 5014		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City State Zip Code Carol Stream IL 60197		Allocated Activity or Event Year-To-Date 488455.72
Purpose of Disbursement: Telephone		Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
Activity or Event Identifier: Administrative		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 58.93 + 221.69 = 280.62		

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
552.18		2077.24		2629.42

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[ ]	[ ]	[ ]

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.36961</b> <b>AT &amp; T-P.O. Box 5080</b> Mailing Address P.O. Box 5080		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Carol Stream IL 60197	Allocated Activity or Event Year-To-Date 489349.03		
Purpose of Disbursement: Telephone	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: <b>Administrative</b>			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
187.60		705.71	893.31

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.36962</b> <b>AT &amp; T-P.O. Box 5014 Carol Stream</b> Mailing Address P.O. Box 5014		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Carol Stream IL 60197	Allocated Activity or Event Year-To-Date 489394.03		
Purpose of Disbursement: Telephone	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
9.45		35.55	45.00

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.36963</b> <b>Commonwealth Edison</b> Mailing Address P.O. Box 6111		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Carol Stream IL 60197	Allocated Activity or Event Year-To-Date 489453.77		
Purpose of Disbursement: Utilities	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
12.55		47.19	59.74

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
209.60		788.45		998.05

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>AIG</b>		<b>Transaction ID : H4.36968</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 22427 Network Place			Allocated Activity or Event Year-To-Date 492400.77	
City Chicago	State IL	Zip Code 60673-1224	Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Insurance workmans comp		<input type="text"/>	Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: <b>Administrative</b>			Date <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="618.87"/>			<input type="text" value="2328.13"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="2947.00"/>	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>UPS</b>		<b>Transaction ID : H4.36969</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Lockbox 577			Allocated Activity or Event Year-To-Date 493186.24	
City Carol Stream	State IL	Zip Code 60132-0577	Date <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Shipping		<input type="text"/>	Date <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			Date <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="164.95"/>			<input type="text" value="620.52"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="785.47"/>	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Comcast Cable</b>		<b>Transaction ID : H4.36972</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 3001			Allocated Activity or Event Year-To-Date 493354.72	
City Southeastern	State PA	Zip Code 19398	Date <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Internet		<input type="text"/>	Date <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			Date <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
<input type="text" value="35.38"/>			<input type="text" value="133.10"/>	
		=	TOTAL AMOUNT	
			<input type="text" value="168.48"/>	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="819.20"/>		<input type="text" value="3081.75"/>		<input type="text" value="3900.95"/>

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.36974</b> Kenny and Kenny, P.C.		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1400 W. 47th Street		Allocated Activity or Event Year-To-Date 497052.22	
City State Zip Code La Grange IL 60525	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Bookkeeping		Allocated Activity or Event Year-To-Date 497052.22	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="776.48"/> + <input type="text" value="2921.02"/> = <input type="text" value="3697.50"/>			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.36975</b> CWLP		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 300 South Seventh Street		Allocated Activity or Event Year-To-Date 497069.08	
City State Zip Code Springfield IL 62757	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Utilities		Allocated Activity or Event Year-To-Date 497069.08	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="3.54"/> + <input type="text" value="13.32"/> = <input type="text" value="16.86"/>			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.36979</b> AT & T Teleconference Services		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 5002		Allocated Activity or Event Year-To-Date 497263.79	
City State Zip Code Carol Stream IL 60197	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Telephone		Allocated Activity or Event Year-To-Date 497263.79	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="40.89"/> + <input type="text" value="153.82"/> = <input type="text" value="194.71"/>			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="820.91"/>		<input type="text" value="3088.16"/>		<input type="text" value="3909.07"/>

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Form A: TTI National, Transaction ID: H4.36986. Allocated Activity or Event: Administrative. Date: 12/30/2014. Total Amount: 18.97.

Form B: Sarah Nelson, Transaction ID: H4.36988. Allocated Activity or Event: Administrative. Date: 12/30/2014. Total Amount: 1000.44.

Form C: Emily Wurth, Transaction ID: H4.36989. Allocated Activity or Event: Administrative. Date: 12/30/2014. Total Amount: 122.21.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 239.73, 901.89, 1141.62.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [blank], [blank], [blank].

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.36993</b> <b>Internal Revenue Service</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Department of the Treasury		Allocated Activity or Event Year-To-Date 500761.82	
City State Zip Code Kansas City MO 64999	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll taxes-employees spent < 25% of time on FEA		Allocated Activity or Event Year-To-Date 500761.82	
Activity or Event Identifier: <b>Administrative</b>		Date <input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
83.95 + 315.81 = 399.76			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.36994</b> <b>Illinois Department of Revenue</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Department of Revenue		Allocated Activity or Event Year-To-Date 500835.98	
City State Zip Code Springfield IL 62704	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll taxes-employees spent < 25% of time on FEA		Allocated Activity or Event Year-To-Date 500835.98	
Activity or Event Identifier: Administrative		Date <input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
15.57 + 58.59 = 74.16			

<b>C. Full Name (Last, First, Middle Initial)</b>		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address		Allocated Activity or Event Year-To-Date	
City State Zip Code	Category/ Type	Date	
Purpose of Disbursement:		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Date	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
[Empty] + [Empty] = [Empty]			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.52		374.40		473.92

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
13454.31		50613.87		64068.18

**SCHEDULE H5 (FEC Form 3X)**

**TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS
---

NAME OF ACCOUNT Democratic Party of IL Non Federal	DATE OF RECEIPT MM / DD / YYYY 12 / 03 / 2014	TOTAL AMOUNT TRANSFERRED 375408.88
---	---	---------------------------------------

BREAKDOWN OF THIS TRANSFER		Transaction ID : H5.37002
VOTER REGISTRATION		
i) Voter Registration	Total Amount Transferred for Voter Registration.....	0.00
VOTER ID		
ii) Voter ID	Total Amount Transferred for Voter ID .....	0.00
GOTV		
iii) GOTV	Total Amount Transferred for GOTV .....	0.00
GENERIC CAMPAIGN ACTIVITY		
iv) Generic Campaign Activity	Total Amount Transferred for Generic Campaign Activity .....	375408.88

NAME OF ACCOUNT Democratic Party of IL Non Federal	DATE OF RECEIPT MM / DD / YYYY 12 / 17 / 2014	TOTAL AMOUNT TRANSFERRED 84951.61
---	---	--------------------------------------

BREAKDOWN OF THIS TRANSFER		Transaction ID : H5.37299
VOTER REGISTRATION		
i) Voter Registration	Total Amount Transferred for Voter Registration.....	0.00
VOTER ID		
ii) Voter ID	Total Amount Transferred for Voter ID .....	0.00
GOTV		
iii) GOTV	Total Amount Transferred for GOTV .....	0.00
GENERIC CAMPAIGN ACTIVITY		
iv) Generic Campaign Activity	Total Amount Transferred for Generic Campaign Activity .....	84951.61

<b>TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)</b>	
TOTAL This Period (Voter Registration).....	0.00
TOTAL This Period (Voter ID) .....	0.00
TOTAL This Period (GOTV).....	0.00
TOTAL This Period (Generic Campaign Activity).....	460360.49
TOTAL This Period (Total Amount of Transfers Received).....	460360.49

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID : SL.37003

NAME OF COMMITTEE (In Full) DEMOCRATIC PARTY OF ILLINOIS		
NAME OF ACCOUNT Democratic Party of IL Non Federal		
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
(a) Itemized ..... (Use Schedule L-A)	0.00	40000.00
(b) Unitemized .....	0.00	0.00
(c) Total .....	0.00	40000.00
2. OTHER RECEIPTS .....	0.00	1870378.88
3. TOTAL RECEIPTS ..... (Add Lines 1c and 2)	0.00	1910378.88
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration .....	0.00	0.00
(b) Voter ID .....	0.00	0.00
(c) GOTV .....	0.00	0.00
(d) Generic Campaign .....	460360.49	1243262.95
(e) Total .....	460360.49	1243262.95
5. OTHER DISBURSEMENTS .....	0.00	0.00
6. TOTAL DISBURSEMENTS ..... (Add Lines 4e and 5)	460360.49	1243262.95
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	1127476.42	0.00
8. RECEIPTS ..... (from Line 3)	0.00	1910378.88
9. SUBTOTAL ..... (Add Lines 7 and 8)	1127476.42	1910378.88
10. DISBURSEMENTS ..... (From Line 6)	460360.49	1243262.95
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	667115.93	667115.93

**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**

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

FOR LINE NUMBER: PAGE 51 OF 51  
(check only one)  4a  4c  5  
 4b  4d

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**A. DEMOCRATIC PARTY OF ILLINOIS**  
Mailing Address P.O. BOX 518  
City State Zip Code  
SPRINGFIELD IL 62705  
Purpose of Disbursement  
Levin transfer to federal account

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 03 / 2014  
**Transaction ID : SBSL4D.37653**  
Amount of Each Disbursement this Period  
375408.88  
**Account : 18789**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**B. DEMOCRATIC PARTY OF ILLINOIS**  
Mailing Address P.O. BOX 518  
City State Zip Code  
SPRINGFIELD IL 62705  
Purpose of Disbursement  
Levin transfer to federal account

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 17 / 2014  
**Transaction ID : SBSL4D.37656**  
Amount of Each Disbursement this Period  
84951.61  
**Account : 18789**

Full Name (Last, First, Middle Initial) / Full Organization Name  
**C.**  
Mailing Address  
City State Zip Code  
Purpose of Disbursement

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
Amount of Each Disbursement this Period  
Account :

Full Name (Last, First, Middle Initial) / Full Organization Name  
**D.**  
Mailing Address  
City State Zip Code  
Purpose of Disbursement

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
Amount of Each Disbursement this Period  
Account :

Full Name (Last, First, Middle Initial) / Full Organization Name  
**E.**  
Mailing Address  
City State Zip Code  
Purpose of Disbursement

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
Amount of Each Disbursement this Period  
Account :

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

460360.49  
460360.49