

# 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.

To Protect Our Heritage PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Alan E. Molotsky

Signature of Treasurer Alan E. Molotsky [Electronically Filed] Date  /  /

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**To Protect Our Heritage PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		<input type="text" value="197575.21"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="192908.58"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="32600.39"/>	<input type="text" value="49799.43"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="225508.97"/>	<input type="text" value="247374.64"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17842.03"/>	<input type="text" value="39707.70"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="207666.94"/>	<input type="text" value="207666.94"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

Write or Type Committee Name

**To Protect Our Heritage PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	30150.00	46250.00
(ii) Unitemized .....	1275.00	2325.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	31425.00	48575.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	31425.00	48575.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1175.39	1224.43
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	32600.39	49799.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	32600.39	49799.43

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6342.03	17207.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6342.03	17207.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11500.00	22500.00
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	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17842.03	39707.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17842.03	39707.70

**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) .....	31425.00	48575.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	31425.00	48575.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6342.03	17207.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6342.03	17207.70

**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 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**To Protect Our Heritage PAC**

**A. Sanford L Barr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 832 Dauphine Court  
 City Northbrook State IL Zip Code 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Sanford L. Barr, DDS Occupation Dentist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **09 / 02 / 2011**  
**Transaction ID : SA11AI.6277**  
 Amount of Each Receipt this Period **1000.00**  
 Contribution to PAC

**B. Alan Cahn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6653 N. Minnehaha  
 City Lincolnwood State IL Zip Code 60712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Walgreens Occupation Pharmacist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **09 / 26 / 2011**  
**Transaction ID : SA11AI.6263**  
 Amount of Each Receipt this Period **1000.00**  
 Contribution to PAC

**C. Kathy Feiger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2314 N. Cambridge Ave.  
 City Chicago State IL Zip Code 60614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **12 / 05 / 2011**  
**Transaction ID : SA11AI.6268**  
 Amount of Each Receipt this Period **1000.00**  
 Contribution to PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3000.00</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 7 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

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

Mailing Address 6833 N. Kedzie

City Chicago State IL Zip Code 60645

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

Name of Employer Chicago Board of Education Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2050.00

Date of Receipt 09 / 26 / 2011  
**Transaction ID : SA11AI.6262**

Amount of Each Receipt this Period 1800.00

Contribution to PAC

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

Mailing Address 2386 Tennyson

City Highland Park State IL Zip Code 60035

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

Name of Employer Wells Fargo Occupation Investment Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 09 / 2011  
**Transaction ID : SA11AI.6281**

Amount of Each Receipt this Period 5000.00

Contribution to the PAC

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

Mailing Address 275 N. Deere Park E.

City Highland Park State IL Zip Code 60035

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

Name of Employer Self Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 10 / 2011  
**Transaction ID : SA11AI.6288**

Amount of Each Receipt this Period 1000.00

Contribution to PAC

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7800.00

**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 8 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial)  
**A. Diane Horwitz**

Mailing Address 247 E. Chestnut St.

City Chicago State IL Zip Code 60611

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

Name of Employer Retired Occupation Educator

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2011  
**Transaction ID : SA11AI.6290**

Amount of Each Receipt this Period  
250.00

Contribution to PAC

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

Mailing Address 1 Pheasant Row

City Lincolnshire State IL Zip Code 60069

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

Name of Employer Advocate medical Group Occupation Physician

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  
 07 / 05 / 2011  
**Transaction ID : SA11AI.6295**

Amount of Each Receipt this Period  
500.00

Contribution to PAC

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

Mailing Address 630 Lincoln Ave.

City Glencoe State IL Zip Code 60022

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

Name of Employer Shetland Limited Partnership Occupation Real Estate Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2011  
**Transaction ID : SA11AI.6275**

Amount of Each Receipt this Period  
250.00

Contribution to PAC

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

**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 9 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

**A. Max Lorig**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 718 Carlyle Court  
 City Northbrook State IL Zip Code 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lorig Construction Occupation Civil engineer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **12 / 22 / 2011**  
**Transaction ID : SA11AI.6265**  
 Amount of Each Receipt this Period **1000.00**  
 Contribution to PAC

**B. Stephen Malkin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 440 Lakeside Terrace  
 City Glencoe State IL Zip Code 60022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Range Capital Management Occupation Executive  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt **09 / 07 / 2011**  
**Transaction ID : SA11AI.6279**  
 Amount of Each Receipt this Period **5000.00**  
 Contribution to PAC

**C. Robert Mazer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 N. Michigan Ave.  
 City Chicago State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **09 / 26 / 2011**  
**Transaction ID : SA11AI.6261**  
 Amount of Each Receipt this Period **1000.00**  
 Contribution to PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>7000.00</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 10 OF 24
<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)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial) <b>A. Robert Mazer</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 24 / 2011
Mailing Address 800 N. Michigan Ave.		<b>Transaction ID : SA11AI.6266</b>
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	Contribution to PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Alan E. Molotsky</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011
Mailing Address 3939 W. Greenwood		<b>Transaction ID : SA11AI.6260</b>
City Skokie	State IL	Zip Code 60076
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Oak Ridge Investments, LLC	Occupation Lawyer	Contribution to PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) <b>C. Alan E. Molotsky</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011
Mailing Address 3939 W. Greenwood		<b>Transaction ID : SA11AI.6267</b>
City Skokie	State IL	Zip Code 60076
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Oak Ridge Investments, LLC	Occupation Lawyer	Contribution to PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

<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 11 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

**A. Sheldon Reitman**  
Full Name (Last, First, Middle Initial)

Mailing Address 6401 N. Knox

City Lincolnwood State IL Zip Code 60712

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

Name of Employer Shephard Schwartz Occupation Accountant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2011

**Transaction ID : SA11AI.6264**

Amount of Each Receipt this Period  
1000.00

Contribution to PAC

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

Mailing Address 181 W. Madison Suite 4700

City Chicago State IL Zip Code 60602

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

Name of Employer MB Real Estate Occupation Tenant Representaiton

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  
 07 / 10 / 2011

**Transaction ID : SA11AI.6297**

Amount of Each Receipt this Period  
500.00

Contribution to PAC

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

Mailing Address 40 Fairview Ave.

City Deerfield State IL Zip Code 60015

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

Name of Employer Housewife Occupation N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2011

**Transaction ID : SA11AI.6271**

Amount of Each Receipt this Period  
1800.00

Contribution to PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3300.00
<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 12 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

**A. Ms Beverly Sandler**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2335 Robertson Lane

City Flossmoor	State IL	Zip Code 60422
-------------------	-------------	-------------------

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

Name of Employer Self employed	Occupation Shoe store owner
-----------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2011

**Transaction ID : SA11AI.6289**

Amount of Each Receipt this Period  
250.00

Contribution to PAC

**B. Ms Beverly Sandler**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2335 Robertson Lane

City Flossmoor	State IL	Zip Code 60422
-------------------	-------------	-------------------

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

Name of Employer Self employed	Occupation Shoe store owner
-----------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2011

**Transaction ID : SA11AI.6276**

Amount of Each Receipt this Period  
2500.00

Contribution to PAC

**C. Peggy P. Shapiro**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4545 W. Touhy

City Lincolnwood	State IL	Zip Code 60712
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2011

**Transaction ID : SA11AI.6259**

Amount of Each Receipt this Period  
1800.00

Contribution to PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4550.00
<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 13 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial) <b>A. Bruce A. Weininger</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2011
Mailing Address 2550 Steven Lane		<b>Transaction ID : SA11AI.6274</b>
City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Kovitz Investment Group	Occupation Principal	Contribution to PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Izzy Weinzwieg</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 10 / 2011
Mailing Address 9711 Kildare		<b>Transaction ID : SA11AI.6293</b>
City Skokie	State IL	Zip Code 60076
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Contribution to PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	30150.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 14 OF 24  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

**A.** Full Name (Last, First, Middle Initial)  
**1st Equity Bank Northwest**

Mailing Address 1330 Dundee

City Buffalo Grove State IL Zip Code 60089

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1159.81

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2011

**Transaction ID : SA17.6245**

Amount of Each Receipt this Period  
1159.81

Interest

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1159.81
<b>TOTAL</b> This Period (last page this line number only).....▶	1159.81

**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)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial)

**A. Alan E. Molotsky**

Mailing Address 3939 W. Greenwood

City State Zip Code  
Skokie IL 60076

Purpose of Disbursement  
Reimburse postage and some copying and printing

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6249**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Alan E. Molotsky**

Mailing Address 3939 W. Greenwood

City State Zip Code  
Skokie IL 60076

Purpose of Disbursement  
Postage, labels, and copying

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6253**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Moneris Solutions Inc.**

Mailing Address 700 East Lake Cook Road

City State Zip Code  
Elk Grove Village IL 60089

Purpose of Disbursement  
Charge Card Processing Fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6229**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

**A. Moneris Solutions Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 700 East Lake Cook Road

City Elk Grove Village State IL Zip Code 60089

Purpose of Disbursement Charge Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 08 / 03 / 2011

**Transaction ID : SB21B.6234**

Amount of Each Disbursement this Period 61.95

Category/Type 003

**B. Moneris Solutions Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 700 East Lake Cook Road

City Elk Grove Village State IL Zip Code 60089

Purpose of Disbursement Charge Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 05 / 2011

**Transaction ID : SB21B.6233**

Amount of Each Disbursement this Period 81.90

Category/Type 003

**C. Moneris Solutions Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 700 East Lake Cook Road

City Elk Grove Village State IL Zip Code 60089

Purpose of Disbursement Charge Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 03 / 2011

**Transaction ID : SB21B.6230**

Amount of Each Disbursement this Period 202.80

Category/Type 003

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 346.65

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial) <b>A. Moneris Solutions Inc.</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2011
Mailing Address 700 East Lake Cook Road		<b>Transaction ID : SB21B.6231</b>
City Elk Grove Village State IL Zip Code 60089	Amount of Each Disbursement this Period 61.95	
Purpose of Disbursement Charge Card Processing Fees	Category/Type 003	Amount of Each Disbursement this Period 61.95
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Moneris Solutions Inc.</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2011
Mailing Address 700 East Lake Cook Road		<b>Transaction ID : SB21B.6232</b>
City Elk Grove Village State IL Zip Code 60089	Amount of Each Disbursement this Period 61.95	
Purpose of Disbursement Charge Card Processing Fees	Category/Type 003	Amount of Each Disbursement this Period 61.95
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Reliable Mail Services, Inc.</b>		Date of Disbursement MM / DD / YYYY 12 / 15 / 2011
Mailing Address 5115 Suffield Terrace		<b>Transaction ID : SB21B.6248</b>
City Skokie State IL Zip Code 60077	Amount of Each Disbursement this Period 378.36	
Purpose of Disbursement Printing fee for fundraising	Category/Type 003	Amount of Each Disbursement this Period 378.36
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	502.26
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial)

**A. Peggy P. Shapiro**

Mailing Address 4545 W. Touhy

City Lincolnwood State IL Zip Code 60712

Purpose of Disbursement  
Printing for administrative

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 09 / 2011

Transaction ID : SB21B.6251

Amount of Each Disbursement this Period

213.03

Full Name (Last, First, Middle Initial)

**B. Peggy P. Shapiro**

Mailing Address 4545 W. Touhy

City Lincolnwood State IL Zip Code 60712

Purpose of Disbursement  
Printing for fundraising event

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2011

Transaction ID : SB21B.6240

Amount of Each Disbursement this Period

334.00

Full Name (Last, First, Middle Initial)

**C. Peggy P. Shapiro**

Mailing Address 4545 W. Touhy

City Lincolnwood State IL Zip Code 60712

Purpose of Disbursement  
Printing for educational program

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2011

Transaction ID : SB21B.6252

Amount of Each Disbursement this Period

36.14

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

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

583.17

**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)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial)

**A. Peggy P. Shapiro**

Mailing Address 4545 W. Touhy

City Lincolnwood State IL Zip Code 60712

Purpose of Disbursement  
Copying for educational event

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6254**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Peggy P. Shapiro**

Mailing Address 4545 W. Touhy

City Lincolnwood State IL Zip Code 60712

Purpose of Disbursement  
Copying for educational event

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6255**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Peggy P. Shapiro**

Mailing Address 4545 W. Touhy

City Lincolnwood State IL Zip Code 60712

Purpose of Disbursement  
Copying for fundraising event

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6256**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial)

**A. Peggy P. Shapiro**

Mailing Address 4545 W. Touhy

City Lincolnwood State IL Zip Code 60712

Purpose of Disbursement  
Reimbursement for web fees for PAC

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6258**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. The Mail Post**

Mailing Address 2421 W. Pratt

City Chicago State IL Zip Code 60645

Purpose of Disbursement  
Mailing service

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6239**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Union League Club**

Mailing Address 65 W. Jackson Blvd

City Chicago State IL Zip Code 60604

Purpose of Disbursement  
Deposit for Fundraising event - rental of space

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6283**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial)

**A. US Post Office**

Mailing Address Dirkson Federal Office Building

City Chicago State IL Zip Code 60604

Purpose of Disbursement Postage

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6250**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

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

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial)

**A. CARDIN, BENJAMIN L**

Mailing Address PO BOX 21093

City CATONSVILLE State MD Zip Code 21228

Purpose of Disbursement  
Contribution to Election Campaign

011

Candidate Name  
**CARDIN, BENJAMIN L**

Category/  
Type

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2011

Transaction ID : **SB23.6226**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. CASEY, ROBERT P JR**

Mailing Address PO BOX 58746

City PHILADELPHIA State PA Zip Code 19102

Purpose of Disbursement  
Contribution to Election Campaign

011

Candidate Name  
**CASEY, ROBERT P JR**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 00

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2011

Transaction ID : **SB23.6228**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. HULTGREN, RANDY**

Mailing Address 1S651 VERDUN DRIVE

City WINFIELD State IL Zip Code 60190

Purpose of Disbursement  
Contribution to Election Campaign

011

Candidate Name  
**HULTGREN, RANDY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 14

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 23 / 2011

Transaction ID : **SB23.6238**

Amount of Each Disbursement this Period

500.00

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

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

1500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial)

**A. LIPINSKI, DANIEL WILLIAM**

Mailing Address 4501 GRAND AVENUE

City WESTERN SPRINGS State IL Zip Code 60558

Purpose of Disbursement  
Contribution to Election Campaign

Candidate Name

**LIPINSKI, DANIEL WILLIAM**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 03

Date of Disbursement

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

**Transaction ID : SB23.6219**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MANZULLO, DONALD A.**

Mailing Address 792 E Lightsville Rd

City Egan State IL Zip Code 61047

Purpose of Disbursement  
Contribution to Election Campaign

Candidate Name

**MANZULLO, DONALD A.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 16

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2011

**Transaction ID : SB23.6235**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. MCCONNELL SENATE COMMITTEE '08**

Mailing Address PO BOX 1496

City LOUISVILLE State KY Zip Code 40201

Purpose of Disbursement  
Contribution to Election Campaign

Candidate Name

**MCCONNELL SENATE COMMITTEE '08**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: KY District: 00

Date of Disbursement

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

**Transaction ID : SB23.6220**

Amount of Each Disbursement this Period

5000.00

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

7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial)

**A. PASCRELL FOR CONGRESS**

Mailing Address P.O. BOX 640

City TOTOWA State NJ Zip Code 07511

Purpose of Disbursement  
Contribution to Election Campaign

011

Candidate Name

**PASCRELL FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NJ District: 08

Date of Disbursement

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

Transaction ID : SB23.6227

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. ROSKAM, PETER**

Mailing Address 141 Shelley Lane

City Wheaton State IL Zip Code 60187

Purpose of Disbursement  
Contribution to Election Campaign

011

Candidate Name

**ROSKAM, PETER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 05 / 2011

Transaction ID : SB23.6221

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

3000.00

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

11500.00