PAGE 1 / 13

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For	An Authorize	d Committee	9		Office Use Only
NAME OF COMMITTEE (in	TYPE OR	PRINT ▼	Example: over the	If typing, type lines.	12FE4M5)
CITIZENS FO	R PALOMO					
	PO BOX	3274				
ADDRESS (number a	nd street)					
Check if di		IOTON				20044
than previous reported. (A		GION				60011
2. FEC IDENTIFI	CATION NUMBER ▼	C	ITY A		STATE A	ZIP CODE
C C004984	51	3. IS ⁻ REF	THIS X	NEW (N) OR	AMENI (A)	DED STATE ▼ DISTRICT DED IL 08
		1				
	PORT (Choose One)	(b) 12-E	Day PRE -Election	on Report for th	e:	
(a) Quarterly F	Reports:		Prima	ıry (12P)	General (12G) Runoff (12R)
April 1	5 Quarterly Report (Q1)		- F	ention (12C)	Special (1	(20)
X July 15	Quarterly Report (Q2)		Conve	ention (120)	Special (1	25)
Octobe	er 15 Quarterly Report (Q3) Elec	ction on	M / D D	/ Y Y Y Y	in the State of
Januar	y 31 Year-End Report (\	(c) 30-E	Day POST -Elect	tion Report for t	he:	
			Gene	ral (30G)	Runoff (30	OR) Special (30S)
Termin	ation Report (TER)	Elec	etion on	/ D D	/ Y " Y " Y	in the State of
5. Covering Period	M M / D 0	D / Y Y Y 2014		rough (06 30 /	Y Y Y Y Y 2014
I certify that I have	examined this Report a	and to the best o	of my knowledg	ge and belief it i	s true, correct and	d complete.
Type or Print Name	of Treasurer Gail Mu	ehrcke				
Signature of Treasur	er <i>Gail Muehrcke</i>		[Electro	onically Filed]	Date 07	/ D D / Y Y Y Y Y Y 2014
NOTE: Submission of	false, erroneous, or inc	omplete informat	ion may subject	the person signi	ng this Report to t	the penalties of 2 U.S.C. §437g.
Office						FEC FORM 3
Use Only						(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 13

FEC Form 3 (Revised 02/2003)

From:

Write or Type Committee Name

CITIZENS FOR PALOMO

			COLUMN A This Period		COLUMN B	-1-
6.	Net	Contributions (other than loans)	This Period		Election Cycle-to-D	ate
	(a)	Total Contributions (other than loans) (from Line 11(e))	, ,	0.00		15147.70
	(b)	Total Contribution Refunds (from Line 20(d))	, ,	0.00		0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	, ,	0.00		15147.70
7.	Net	Operating Expenditures				
	(a)	Total Operating Expenditures (from Line 17)	, ,	0.00		12663.43
	(b)	Total Offsets to Operating Expenditures (from Line 14)	, ,	0.00		0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	, , , , , ,	0.00		12663.43
8.		th on Hand at Close of sorting Period (from Line 27)	1	367.47		
9.	the	ots and Obligations Owed TO Committee (Itemize all on edule C and/or Schedule D)		0.00		
10.	the	ots and Obligations Owed BY Committee (Itemize all on edule C and/or Schedule D)	20	600.00		

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 13

0.00

17147.70

Write or Type Committee Name

CITIZENS FOR PALOMO

06 2014 04 01 2014 30 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 12502.00 (i) Itemized (use Schedule A)..... 0.00 1300.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 13802.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) 0.00 1345.70 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 0.00 15147.70 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 2000.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 2000.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS

16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15)

(Dividends, Interest, etc.)

(Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 13

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	12663.43
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
 21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	12663.43
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	1367.47
24	24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		0.00
25.	SUBTOTAL (add Line 23 and Line 24)		1367.47
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	0.00
27.	27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

5 OF

×	13a
	13b

13

LOANS Detailed Summary Page Transaction ID: SC/10.4169 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary ANDREW G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 City State ZIP Code IL 60011 BARRINGTON Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 07^M ^D18 2011 0.00 7/18/2013 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE

×	13a
	13b

13

OF

Transaction ID: SC/10.4343 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary ANDREW G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 City State ZIP Code IL 60011 BARRINGTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M ^D 17 2011 0.00 7/18/2013 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

×	13a
	13b

13

OF

Detailed Summary Page Transaction ID: SC/10.4344 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary ANDREW G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 City State ZIP Code IL 60011 BARRINGTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D31 ^M 10^M 2011 0.00 7/18/2013 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE

8

X 13a 13b

OF

13

	Detailed Summary Page 13b		
AME OF COMMITTEE (In Full) CITIZENS FOR PALOMO	Transaction ID : SC/10.4348		
LOAN SOURCE Full Name (Last, First, Middle Initial) ANDREW G. PALOMO Mailing Address PO BOX 3274	[PERSONAL FUNDS] Election: 2012 Primary General Other (specify) ▼		
City State ZIP Code BARRINGTON IL 60011	e		
Original Amount of Loan Cumulative Payment To E	Date Balance Outstanding at Close of This Period 0.00 5000.00		
	Interest Rate Secured: 0.00 (apr) Secured: Yes No		
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employer		
, , , ,	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

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

FOR LINE NUMBER: (check only one)

PAGE

X	13a
	13b

13

OF

Transaction ID: SC/10.4349 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary ANDREW G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 City State ZIP Code IL 60011 BARRINGTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D25 2011 0.00 7/18/2013 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

10

×	13a
	13h

13

(check only one) Detailed Summary Page Transaction ID: SC/10.4395 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary ANDREW G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 City State ZIP Code IL 60011 BARRINGTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D31 ^M 01^M Ž012 7/2013 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

11

X	13a
	13h

13

Detailed Summary Page Transaction ID: SC/10.4406 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary ANDREW G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 City State ZIP Code IL 60011 BARRINGTON Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2100.00 0.00 2100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 07 ^M 05^M Ž012 0.00 5/7/13 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 2100.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE

12

×	13a
	13b

13

Transaction ID: SC/10.4407 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary ANDREW G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 City State ZIP Code IL 60011 BARRINGTON Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 06^M Ž012 0.00 6/1/13 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

13

×	13a
	13b

13

for each category of the **LOANS** (check only one) Detailed Summary Page Transaction ID: SC/10.4423 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary ANDREW G G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 State ZIP Code City IL 60011 BARRINGTON Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M 03 Ž012 0.00 4/3/14 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) 20600.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.