

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Illinois Political Active Letter Carriers

ADDRESS (number and street)

P.O. Box 561

☐ Check if different than previously reported. (ACC)

Orland Park

IL

60462

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00264689

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y 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 Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Jack Heniff

Signature of Treasurer

Mr. Jack Heniff

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Illinois Political Active Letter Carriers

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y
04 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		71704.08
(b) Cash on Hand at Beginning of Reporting Period.....	69976.52	
(c) Total Receipts (from Line 19)	7875.00	13762.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	77851.52	85466.33
7. Total Disbursements (from Line 31)	3887.81	11502.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	73963.71	73963.71
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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

Illinois Political Active Letter Carriers

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04	/	01	/	2013

To:

M M	/	D D	/	Y Y Y Y Y
04	/	30	/	2013

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).....

3118.00

4626.00

(ii) Unitemized

4757.00

9136.25

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

7875.00

13762.25

(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)

7875.00

13762.25

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

7875.00

13762.25

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

7875.00

13762.25

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	787.81	1928.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	787.81	1928.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	750.00	3750.00
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	2350.00	5824.51
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)) ..	3887.81	11502.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3887.81	11502.62

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)	7875.00	13762.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7875.00	13762.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	787.81	1928.11
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	787.81	1928.11

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. Steve Bilzing

Mailing Address 1725 N. 17th St

City
Belleville

State Zip Code
IL 62226

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 26 / 2013

Transaction ID : SA11Al.13078

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

B. Geoffrey Brown

Mailing Address POB 451

City
Maywood

State Zip Code
IL 60153

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 23 / 2013

Transaction ID : SA11Al.13115

Amount of Each Receipt this Period

125.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ken Christy

Mailing Address 1110 Laurel Dr

City
Aurora

State Zip Code
IL 60506

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 06 / 2013

Transaction ID : SA11Al.13056

Amount of Each Receipt this Period

180.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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

605.00

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)

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. David Colegrove

Mailing Address 106 E Jefferson St
61

City State Zip Code
Shorewood IL 60431

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2013

Transaction ID : SA11AI.13063

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

B. David Colegrove

Mailing Address 106 E Jefferson St
61

City State Zip Code
Shorewood IL 60431

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2013

Transaction ID : SA11AI.13118

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

C. John Cooksey

Mailing Address 17962 Monroe Rd

City State Zip Code
Johnston City IL 62951

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 26 / 2013

Transaction ID : SA11AI.13081

Amount of Each Receipt this Period

280.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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

380.00

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 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. William Dangerfield

Mailing Address PO Box 43158

City

Chicago

State

IL

Zip Code

60643

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carriers

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 23 / 2013

Transaction ID : SA11AI.13100

Amount of Each Receipt this Period

125.00

Contribution

Full Name (Last, First, Middle Initial)

B. Daniel Davis

Mailing Address 717 S Independence

City

Mascoutah

State

IL

Zip Code

62258

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 02 / 2013

Transaction ID : SA11AI.13064

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mike Eckel

Mailing Address 1807 Sarah Dr

City

Olney

State

IL

Zip Code

62450

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 26 / 2013

Transaction ID : SA11AI.13082

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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

625.00

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

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

FOR LINE NUMBER: PAGE 9 OF 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. Mark Leasure

Mailing Address 1704 Clement

City State Zip Code
 Crst Hill IL 60435

FEC ID number of contributing federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 26 / 2013

Transaction ID : SA11AI.13077

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ken Miller

Mailing Address 181 Glen Ave

City State Zip Code
 Crystal Lake IL 60014

FEC ID number of contributing federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 26 / 2013

Transaction ID : SA11AI.13095

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Debbie Moench

Mailing Address 3493 S Paw Paw Rd

City State Zip Code
 Earlville IL 60518

FEC ID number of contributing federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 26 / 2013

Transaction ID : SA11AI.13097

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. Stafford Price

Mailing Address 9345 S Princeton

City State Zip Code
 Chicago IL 60609

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 23 / 2013

Transaction ID : SA11AI.13111

Amount of Each Receipt this Period

230.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dale Shuler

Mailing Address 1417 County Rd 900 E

City State Zip Code
 Carmi IL 62821

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 26 / 2013

Transaction ID : SA11AI.13079

Amount of Each Receipt this Period

528.00

Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

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

758.00

3118.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 15

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. AT & T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2013

Mailing Address Bill Payment Center

City	State	Zip Code
Saginaw	WI	48663

Transaction ID : SB21B.13055Purpose of Disbursement
Telephone Fax

Amount of Each Disbursement this Period

Candidate Name

Illinois Political Active Letter CarriersCategory/
Type

23.69

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. AT & T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2013

Mailing Address Bill Payment Center

City	State	Zip Code
Saginaw	WI	48663

Transaction ID : SB21B.13071Purpose of Disbursement
Computer Access

Amount of Each Disbursement this Period

Candidate Name

Illinois Political Active Letter CarriersCategory/
Type

75.00

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. AT & T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2013

Mailing Address Bill Payment Center

City	State	Zip Code
Saginaw	WI	48663

Transaction ID : SB21B.13072Purpose of Disbursement
Cell Phone

Amount of Each Disbursement this Period

Candidate Name

Illinois Political Active Letter CarriersCategory/
Type

54.35

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ►

153.04

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

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. 10th Congressional District Democrats

Mailing Address P.O. Box 523

City	State	Zip Code
Deerfield	IL	60015

Purpose of Disbursement
Ticket Purchase

Candidate Name

10th Congressional District Democrats

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

Transaction ID : SB23.13073

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Kelly Robin

Mailing Address P.O. Box 6953

City	State	Zip Code
Chicago	IL	60680

Purpose of Disbursement
Contribution

Candidate Name

Robin Kelly

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2013

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	02	/	2013

Transaction ID : SB23.13052

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

750.00

750.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 15

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. Democratic Party of DuPage County

Mailing Address 1000-7 Rohlwing Rd

City	State	Zip Code
Lombard	IL	60148

Purpose of Disbursement
Ticket Purchase

Candidate Name

Democratic Party of DuPage County

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2013

Transaction ID : SB29.13120

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

B. Grundy County Democrats

Mailing Address P.O. Box 602

City	State	Zip Code
Morris	IL	60450

Purpose of Disbursement
Ticket Purchase

Candidate Name

Gundy County Democrats

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2013

Transaction ID : SB29.13074

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. ILLINOIS AFL-CIO

Mailing Address 828 S SECOND STREET SUITE 200

City	State	Zip Code
SPRINGFIELD	IL	62704

Purpose of Disbursement
Ticket Purchase

Candidate Name

ILLINOIS AFL-CIO

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2013

Transaction ID : SB29.13119

Amount of Each Disbursement this Period

800.00

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

1850.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 15

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

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

Full Name (Last, First, Middle Initial)

A. Sheila Simon

Mailing Address P.O. box 814

City	State	Zip Code
Carbondale	IL	62903

Purpose of Disbursement
Contribution

Candidate Name

Sheila Simon

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2013

Transaction ID : SB29.13053

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> 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
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> 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
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Amount of Each Disbursement this Period

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

500.00

2350.00
