

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

SCHAKOWSKY FOR CONGRESS

ADDRESS (number and street) ▼

P.O. BOX 5130

Check if different than previously reported. (ACC)

EVANSTON

IL

60204

2. **FEC IDENTIFICATION NUMBER** ▼

C C00327023

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

IL

09

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)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) 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 Melanie Rovner Cohen

Signature of Treasurer Melanie Rovner Cohen

[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

Write or Type Committee Name
SCHAKOWSKY FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	138785.70	1275385.98
(b) Total Contribution Refunds (from Line 20(d))	81.25	3777.97
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	138704.45	1271608.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	112623.85	946315.35
(b) Total Offsets to Operating Expenditures (from Line 14).....	186.31	9894.37
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	112437.54	936420.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	343661.16	
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	

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)

Write or Type Committee Name

SCHAKOWSKY FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	55647.00	757199.84
(ii) Unitemized	15638.70	174466.38
(iii) TOTAL of contributions from individuals	71285.70	931666.22
(b) Political Party Committees.....	0.00	14.28
(c) Other Political Committees (such as PACs).....	67500.00	343405.48
(d) The Candidate	0.00	300.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	138785.70	1275385.98
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	186.31	9894.37
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	99.55	1189.92
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	139071.56	1286470.27

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	112623.85	946315.35
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
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	81.25	3777.97
(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 20(a), (b), and (c)).....	81.25	3777.97
21. OTHER DISBURSEMENTS	58395.00	326625.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	171100.10	1276718.32

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	375689.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	139071.56
25. SUBTOTAL (add Line 23 and Line 24).....	514761.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	171100.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	343661.16

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Aurora Abella Austriaco

Mailing Address 17 N. Aldine

City Park Ridge State IL Zip Code 60068

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

Name of Employer Clark Hill Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.12727

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Hytham Al-Masri

Mailing Address 8101 Pickens Drive

City Orland Park State IL Zip Code 60462

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

Name of Employer Hematogenix Occupation President and CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11AI.12509

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mohamad Al-Masri

Mailing Address 10939 Ashton Lane

City Orland Park State IL Zip Code 60467

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

Name of Employer Hematogenix Laboratory Occupation Executive Vice President & CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11AI.12505

Amount of Each Receipt this Period
750.00

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

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

1400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jill L Allread

Mailing Address 179-3 Linden Avenue

City State Zip Code
Oak Park IL 60302

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

Name of Employer Occupation
PCI Vice President Public Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.12723

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Michael Anderson

Mailing Address 1225 Asbury Avenue

City State Zip Code
Evanston IL 60202

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

Name of Employer Occupation
The Evanston Group Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.12883

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
David Appel

Mailing Address 5220 North LaTrobe

City State Zip Code
Chicago IL 60630

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

Name of Employer Occupation
City of Chicago Police

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2014

Transaction ID : SA11AI.12409

Amount of Each Receipt this Period
150.00

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John Barry

Mailing Address 6121 N. Sheridan, #4F

City Chicago State IL Zip Code 60660

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

Name of Employer PNC Capital Occupation Investment Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12880

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Bernard Bartilad

Mailing Address 1822 West Greenleaf

City Chicago State IL Zip Code 60626

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

Name of Employer Chicago House Occupation Develoment Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12899

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Karyn L. Bass Ehler

Mailing Address 1822 W. Thomas #2

City Chicago State IL Zip Code 60622

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

Name of Employer Hughes Socol Piers Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : SA11AI.12433

Amount of Each Receipt this Period
100.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Cherif Bassiouni

Mailing Address 680 N. Lake Shore Drive

City Chicago State IL Zip Code 60611

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12909

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Brian Bates

Mailing Address 1225 W. Eddy Street

City Chicago State IL Zip Code 60657

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

Name of Employer Morrison Foerster Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11AI.12684

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Brian Bates

Mailing Address 1225 W. Eddy Street

City Chicago State IL Zip Code 60657

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

Name of Employer Morrison Foerster Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11AI.12687

Amount of Each Receipt this Period
1600.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 150	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Joseph Battaglia		Date of Receipt MM / DD / YYYY 07 / 24 / 2014
Mailing Address 1742 N. New England Avenue		Transaction ID : SA11AI.12478
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 350.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Charles Benton		Date of Receipt MM / DD / YYYY 07 / 15 / 2014
Mailing Address 581 Ingleside Park		Transaction ID : SA11AI.12370
City Evanston	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Films, Inc	Occupation Executive	Election Cycle-to-Date 1550.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Gershon R. Berkson		Date of Receipt MM / DD / YYYY 07 / 11 / 2014
Mailing Address 2735 Woodland Road		Transaction ID : SA11AI.12344
City Evanston	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer University of Illinois-Chicago	Occupation Psychology Professor	Election Cycle-to-Date 950.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jacqueline Bermak

Mailing Address 2315 Pioneer Road

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
Self-employed Social Worker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : SA11AI.12356

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Arthur Berman

Mailing Address 6007 N. Sheridan #18A

City State Zip Code
Chicago IL 60660

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

Name of Employer Occupation
Self-employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : SA11AI.12341

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Sharen Berman

Mailing Address 180 E. Pearson Street #1604

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation
Joan Dachs Bais Yaakov Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
330.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.12863

Amount of Each Receipt this Period
72.00

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

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

272.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Steve Bernstein		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 29 / 2014
Mailing Address 943 Elmwood		Transaction ID : SA11Al.12495
City Evanston	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer State of Illinois	Occupation Judge	Election Cycle-to-Date 3700.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Stuart Bernstein		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 14 / 2014
Mailing Address 1500 Sheridan Road Apt. 3B		Transaction ID : SA11Al.12361
City Wilmette	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Lieselotte Betterman		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 21 / 2014
Mailing Address 1506 Willow Lane		Transaction ID : SA11Al.12673
City Mt. Prospect	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 1475.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stella Black

Mailing Address 545 W. Aldine #2A

City Chicago	State IL	Zip Code 60657
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed	Occupation Real Property Consultant
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12634

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Timuel Black

Mailing Address 4906 South Drexel

City Chicago	State IL	Zip Code 60615
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : SA11AI.12304

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Nancie Blatt

Mailing Address 840 Audubon Way SV215

City Lincolnshire	State IL	Zip Code 60069
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed	Occupation Community Volunteer
-----------------------------------	-----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4200.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : SA11AI.12399

Amount of Each Receipt this Period
100.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joseph Block

Mailing Address 549 Michigan Avenue

City Evanston State IL Zip Code 60202

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

Name of Employer Block Steel Corp. Occupation Executive/Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3900.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.12744

Amount of Each Receipt this Period
700.00

B. Full Name (Last, First, Middle Initial)
Lucy Blutenthal

Mailing Address 730 Apple Tree Lane

City Glencoe State IL Zip Code 60022

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

Name of Employer Self-employed Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.12337

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Eva Bornstein

Mailing Address 1211 A Central

City Evanston State IL Zip Code 60201

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.12328

Amount of Each Receipt this Period
50.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Patrick Bova

Mailing Address 5445 S. Hyde Park Blvd.

City Chicago State IL Zip Code 60615

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 17 / 2014

Transaction ID : SA11AI.12918

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Sarah Bradley

Mailing Address 2558 Lincoln Park West Unit 2B

City Chicago State IL Zip Code 60614

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

Name of Employer Ounce of Prevention Fund Occupation COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 15 / 2014

Transaction ID : SA11AI.12373

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Thomas F. Broderick

Mailing Address 870 W. Trailcreek Drive

City Peoria State IL Zip Code 61614

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 27 / 2014

Transaction ID : SA11AI.12832

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Gila Bronner
 Full Name (Last, First, Middle Initial)
 Mailing Address 284 Prospect Avenue
 City Highland Park State IL Zip Code 60035
 FEC ID number of contributing federal political committee. C
 Name of Employer Self-employed Occupation Consultant
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014
Transaction ID : SA11AI.12919
 Amount of Each Receipt this Period
 500.00

B. Anthony Bruck
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 S. Dearborn #1101
 City Chicago State IL Zip Code 60605
 FEC ID number of contributing federal political committee. C
 Name of Employer Eckhardt Trading Co. Occupation Programmer
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.12724
 Amount of Each Receipt this Period
 300.00

C. Kenneth Busch
 Full Name (Last, First, Middle Initial)
 Mailing Address 1412 W. Diversey Parkway
 City Chicago State IL Zip Code 60614
 FEC ID number of contributing federal political committee. C
 Name of Employer Self-employed Occupation Psychiatry
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 450.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014
Transaction ID : SA11AI.12452
 Amount of Each Receipt this Period
 100.00

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 150		
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Linda Buyer

Mailing Address 3930 N. Pine Grove, #1441

City Chicago State IL Zip Code 60613

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

Name of Employer Governors State University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2014

Transaction ID : SA11AI.12400

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Linda Buyer

Mailing Address 3930 N. Pine Grove, #1441

City Chicago State IL Zip Code 60613

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

Name of Employer Governors State University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2014

Transaction ID : SA11AI.12401

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
John Cameron

Mailing Address 6555 N. Maplewood

City Chicago State IL Zip Code 60645

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

Name of Employer AFSCME Occupation Political Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12583

Amount of Each Receipt this Period
100.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mark Cappello		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2014	
Mailing Address 1511 W. Ardmore		Transaction ID : SA11AI.12414	
City Chicago	State IL	Zip Code 60660	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Tri County Anesthesia	Occupation Nurse Anesthetist		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 850.00		

Full Name (Last, First, Middle Initial) B. Mark Cappello		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2014	
Mailing Address 1511 W. Ardmore		Transaction ID : SA11AI.12665	
City Chicago	State IL	Zip Code 60660	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer Tri County Anesthesia	Occupation Nurse Anesthetist		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 950.00		

Full Name (Last, First, Middle Initial) C. Mark Cappello		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2014	
Mailing Address 1511 W. Ardmore		Transaction ID : SA11AI.12834	
City Chicago	State IL	Zip Code 60660	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 300.00	
Name of Employer Tri County Anesthesia	Occupation Nurse Anesthetist		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00		

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rae Ceclre

Mailing Address 1232 W. Bryn Mawr

City Chicago State IL Zip Code 60660

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

Name of Employer B&R Developers Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12777

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Leslie Corbett Chenoweth

Mailing Address 10858 S. Artesian

City Chicago State IL Zip Code 60602

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

Name of Employer IL Legal Justice Foundation Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : SA11AI.12441

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Rocco Claps

Mailing Address 413 S. Riverside Drive

City Villa Park State IL Zip Code 60181

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

Name of Employer State of Illinois Occupation Director, Human Rights

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12757

Amount of Each Receipt this Period
300.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 150	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Teresa Clark

Mailing Address 1615 West 35th Street

City Chicago State IL Zip Code 60609

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

Name of Employer City of Chicago Occupation Attorney Law Clerk

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
251.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11AI.12531

Amount of Each Receipt this Period
50.00

Conduit: ActBlue

B. Full Name (Last, First, Middle Initial)
Thomas Coffey

Mailing Address 54 W. Hubbard Street, Suite 200

City Chicago State IL Zip Code 60610

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

Name of Employer The Haymarket Group Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.12471

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Suzanne Cohan-Lange

Mailing Address 3538 N. Pine Grove

City Chicago State IL Zip Code 60657

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

Name of Employer Self-employed Occupation Artist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : SA11AI.12706

Amount of Each Receipt this Period
500.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Steven Cohen

Mailing Address 335 Darrow Avenue

City State Zip Code
Evanston IL 60202

FEC ID number of contributing federal political committee.

Name of Employer Occupation
AT&T Software Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.12874

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Eleanor Cole

Mailing Address 641 North Carlyle Lane

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.12338

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Eleanor Cole

Mailing Address 641 North Carlyle Lane

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.12810

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ellen Collar

Mailing Address 313 Kedzie, #2

City Evanston State IL Zip Code 60202

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

Name of Employer Coldwell Banker Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 16 / 2014

Transaction ID : SA11AI.12627

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Doris Conant

Mailing Address 7346 Green Acres

City Glenview State IL Zip Code 60025

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.12742

Amount of Each Receipt this Period
2200.00

C. Full Name (Last, First, Middle Initial)
Judith Cottle

Mailing Address 1170 Chatfield Road

City Winnetka State IL Zip Code 60093

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11AI.12763

Amount of Each Receipt this Period
100.00

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

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

2400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Gary Cozette

Mailing Address 434 W. Aldine Ave., #3-A

City Chicago State IL Zip Code 60657

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

Name of Employer Chicago Religious Leadership Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12756

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Debby Danoff

Mailing Address 1914 Farnsworth Lane #104

City Northbrook State IL Zip Code 60062

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

Name of Employer Self-employed Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12622

Amount of Each Receipt this Period
50.00

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

Mailing Address 2206 Orrington Ave

City Evanston State IL Zip Code 60201

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.12466

Amount of Each Receipt this Period
250.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jeffrey Dennis

Mailing Address 1370 Shagbark Lane

City State Zip Code
Des Plaines IL 60018

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

Name of Employer Occupation
Self-employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.12753

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
David de Vries

Mailing Address 2715 Harrison Street

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
Firetech Engineering President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
825.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2014

Transaction ID : SA11AI.12363

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
David de Vries

Mailing Address 2715 Harrison Street

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
Firetech Engineering President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
875.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12902

Amount of Each Receipt this Period
50.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kelly Dietrich

Mailing Address 1340 W. Grace

City Chicago State IL Zip Code 60613

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

Name of Employer Self-employed Occupation Fundraising Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.12856

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Jodi Doane

Mailing Address 4758 S. King Drive #4

City Chicago State IL Zip Code 60615

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

Name of Employer Parents Anonymous Occupation Social Worker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11AI.12512

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Michael Doyle

Mailing Address 1102 Shady Lane

City Wheaton State IL Zip Code 60187

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

Name of Employer Iomas Research Inc. Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 13 / 2014

Transaction ID : SA11AI.12738

Amount of Each Receipt this Period
1000.00

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

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

1450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 150		
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ryan Dunigan

Mailing Address 35 W. Wacker Drive

City Chicago State IL Zip Code 60601

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

Name of Employer Winston Strawn Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : SA11AI.12398

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Sharon Eiseman

Mailing Address 4236 N. Ashland Avenue #1

City Chicago State IL Zip Code 60613

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

Name of Employer State of Illinois Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3650.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12878

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Gena Faas

Mailing Address 9011 Roach Avenue

City Brookfield State IL Zip Code 60513

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

Name of Employer Rush University Medical Center Occupation Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.12474

Amount of Each Receipt this Period
150.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Morris A. Fisher

Mailing Address 1246 Judson Ave.

City Evanston State IL Zip Code 60202

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

Name of Employer LVMC/VA Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2014

Transaction ID : SA11AI.12357

Amount of Each Receipt this Period
100.00

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

Mailing Address 324 S. Fairfield Ave.

City Lombard State IL Zip Code 60148

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

Name of Employer Amtrak Occupation Supervisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12765

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Melvin Frankel

Mailing Address 2801 Old Glenview Road #248

City Wilmette State IL Zip Code 60091

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12770

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Judy Freeman

Mailing Address 937 Sherman Ave.

City Evanston State IL Zip Code 60202

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

Name of Employer Gabriel Environmental Services Occupation Environmental Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12648

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Aviva Futorian

Mailing Address 2440 N. Lakeview Avenue

City Chicago State IL Zip Code 60614

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.12854

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Bryna Gamson

Mailing Address 2823 Summit

City Highland Park State IL Zip Code 60035

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA11AI.12671

Amount of Each Receipt this Period
250.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 150	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 11e 15				

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) Howard Gantz		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 16 / 2014
Mailing Address 5400 Meadow Drive North		Transaction ID : SA11AI.12656
City Wilmette	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Semi-retired Self-employed	Occupation Consultant	Election Cycle-to-Date 550.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Lauren Beth Gash		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 16 / 2014
Mailing Address 1345 Forest Avenue		Transaction ID : SA11AI.12711
City Highland Park	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Self-employed	Occupation Attorney	Election Cycle-to-Date 350.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Ireta Gasner		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2014
Mailing Address 1423 W. Thome		Transaction ID : SA11AI.12461
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Ounce of Prevention	Occupation Social Work	Election Cycle-to-Date 700.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dona Gerson		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2014	
Mailing Address 200 Lee Street		Transaction ID : SA11AI.12823	
City Evanston	State IL	Zip Code 60202	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) B. Patty Gerstenblith		Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2014	
Mailing Address 901 Sheridan Road		Transaction ID : SA11AI.12397	
City Wilmette	State IL	Zip Code 60091	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer DePaul	Occupation Professor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Patty Gerstenblith		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 901 Sheridan Road		Transaction ID : SA11AI.12808	
City Wilmette	State IL	Zip Code 60091	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer DePaul	Occupation Professor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Edward Gogol

Mailing Address 835 Arbor Lane

City: Glenview State: IL Zip Code: 60025

FEC ID number of contributing federal political committee: C

Name of Employer: Self-employed Occupation: Agriculture/Writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 606.25

Date of Receipt: 07 / 10 / 2014

Transaction ID : SA11AI.12322

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Edward Gogol

Mailing Address 835 Arbor Lane

City: Glenview State: IL Zip Code: 60025

FEC ID number of contributing federal political committee: C

Name of Employer: Self-employed Occupation: Agriculture/Writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 656.25

Date of Receipt: 07 / 23 / 2014

Transaction ID : SA11AI.12432

Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Edward Gogol

Mailing Address 835 Arbor Lane

City: Glenview State: IL Zip Code: 60025

FEC ID number of contributing federal political committee: C

Name of Employer: Self-employed Occupation: Agriculture/Writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 756.25

Date of Receipt: 08 / 05 / 2014

Transaction ID : SA11AI.12530

Amount of Each Receipt this Period: 100.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Megan Goldish

Mailing Address 100 East Bellevue #7E

City Chicago State IL Zip Code 60611

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

Name of Employer Cook County Occupation Assistant States Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 21 / 2014

Transaction ID : SA11AI.12801

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Rochelle Grimbau

Mailing Address 5451 N. Kenmore Avenue #1F

City Chicago State IL Zip Code 60640

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12872

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Alice Gutenkauf

Mailing Address 8425 N. Mason Avenue

City Morton Grove State IL Zip Code 60053

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
487.50

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 27 / 2014

Transaction ID : SA11AI.12819

Amount of Each Receipt this Period
50.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Philip A. Hannema

Mailing Address 88 W. Schiller, Apt 906

City Chicago State IL Zip Code 60610

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12903

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
James Hansen

Mailing Address 2400 Isabella

City Evanston State IL Zip Code 60201

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

Name of Employer Hansen Creative Occupation Business Communications

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11AI.12540

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Brian Hanson

Mailing Address 3016 Normandy Place

City Evanston State IL Zip Code 60201

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

Name of Employer Northwestern University Occupation University Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 12 / 2014

Transaction ID : SA11AI.12359

Amount of Each Receipt this Period
500.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Harriet Hausman

Mailing Address 1515 Forest Avenue

City River Forest State IL Zip Code 60305

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.12743

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Caroline Heath

Mailing Address 937 Sherman

City Evanston State IL Zip Code 60202

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

Name of Employer American Society of Safety Engineers Occupation Manager, Practice Specialities

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **705.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.12510

Amount of Each Receipt this Period
5.00

C. Full Name (Last, First, Middle Initial)
Caroline Heath

Mailing Address 937 Sherman

City Evanston State IL Zip Code 60202

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

Name of Employer American Society of Safety Engineers Occupation Manager, Practice Specialities

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **710.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2014

Transaction ID : SA11AI.12704

Amount of Each Receipt this Period
5.00

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

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

60.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) Junia Hedberg		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 1249 Cherry St.		Transaction ID : SA11AI.12331
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer North Shore Senior Center	Occupation Nonprofit Manager	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 206.25	

Full Name (Last, First, Middle Initial) Junia Hedberg		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1249 Cherry St.		Transaction ID : SA11AI.12912
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer North Shore Senior Center	Occupation Nonprofit Manager	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 256.25	

Full Name (Last, First, Middle Initial) Michael Herman		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1822 West Greenleaf		Transaction ID : SA11AI.12898
City Chicago	State IL	Zip Code 60626
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Chicago House	Occupation Development Director	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sidney Hollander

Mailing Address 4886 N. Paulina Street

City Chicago State IL Zip Code 60640

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11AI.12507

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Carolyn Horn

Mailing Address 229 Duck Creek Lane

City Georgetown State TX Zip Code 78633

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2014

Transaction ID : SA11AI.12827

Amount of Each Receipt this Period
 25.00

C. Full Name (Last, First, Middle Initial)
Dorothy James

Mailing Address 300 S. Ashland Ave., Suite 302

City Chicago State IL Zip Code 60607

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

Name of Employer AFGE, 7th District Occupation National Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12587

Amount of Each Receipt this Period
 100.00

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

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

2725.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Christopher Johnsen

Mailing Address 525 W. Hawthorne Pl. #2303

City Chicago State IL Zip Code 60657

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.12905

Amount of Each Receipt this Period
300.00

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

Mailing Address 180 North LaSalle Street #2640

City Chicago State IL Zip Code 60601

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

Name of Employer Carpenter Lipps Leland Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 23 / 2014

Transaction ID : SA11AI.12462

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
James Kaplan

Mailing Address 1801 Tower Drive, E222

City Glenview State IL Zip Code 60026

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

Name of Employer State of Illinois Occupation Judge

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.12696

Amount of Each Receipt this Period
200.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kelly Anne Keeler Valvanico

Mailing Address 130 S. Canal Street #9M

City Chicago State IL Zip Code 60606

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

Name of Employer Self-employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : SA11AI.12434

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Peter Kelly

Mailing Address 1316 Davis

City Evanston State IL Zip Code 60201

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

Name of Employer Blue Cross Blue Shield of IL Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11AI.12494

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Miriam Kelm

Mailing Address 1251 St. John's Avenue

City Highland Park State IL Zip Code 60035

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2014

Transaction ID : SA11AI.12811

Amount of Each Receipt this Period
250.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert Kelter

Mailing Address 3160 N. Lincoln Ave #505

City Chicago State IL Zip Code 60657

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

Name of Employer Environmental Policy and Law Center Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.12469

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Jackie Kendall

Mailing Address 1353 Coneflower

City Grayslake State IL Zip Code 60030

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

Name of Employer Self-employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12586

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Jackie Kendall

Mailing Address 1353 Coneflower

City Grayslake State IL Zip Code 60030

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

Name of Employer Self-employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.12836

Amount of Each Receipt this Period
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Helen Kessler

Mailing Address 3702 N. Pine Grove

City Chicago State IL Zip Code 60613

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

Name of Employer JHKessler and Associates Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.12804

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Alan Kimmel

Mailing Address 6947 N. Ridge Blvd.

City Chicago State IL Zip Code 60645

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12633

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Michael Kreloff

Mailing Address 1884 Stockton Drive

City Northfield State IL Zip Code 60093

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12595

Amount of Each Receipt this Period
100.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sue Lannin

Mailing Address 2724 N. Central Park Ave.

City Chicago State IL Zip Code 60647

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11AI.12482

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Carolyn Laughlin

Mailing Address 2414 Lawndale

City Evanston State IL Zip Code 60201

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

Name of Employer Self-employed Occupation Corporate Trainer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 16 / 2014

Transaction ID : SA11AI.12552

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Zafra Margolin Lerman

Mailing Address 1911 Grant

City Evanston State IL Zip Code 60201

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

Name of Employer Self-employed Occupation Scientist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3624.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 23 / 2014

Transaction ID : SA11AI.12454

Amount of Each Receipt this Period
100.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 150	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carolyn Levin		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2014
Mailing Address 425 Davis Street Apt. 825		Transaction ID : SA11AI.12751
City Evanston	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 1708.34
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Betsy Levisay		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2014
Mailing Address 1733 Hinman Avenue		Transaction ID : SA11AI.12463
City Evanston	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self-employed	Occupation Homemaker	Election Cycle-to-Date 600.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Lori Lightfoot		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address 3434 W. Wrightwood		Transaction ID : SA11AI.12869
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Mayer Brown	Occupation Attorney	Election Cycle-to-Date 500.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Astri Lindberg

Mailing Address 2896 Sheridan Place

City Evanston State IL Zip Code 60201

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5175.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11AI.12535

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Astri Lindberg

Mailing Address 2896 Sheridan Place

City Evanston State IL Zip Code 60201

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5275.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11AI.12681

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Martha Loewenthal

Mailing Address 5032 W. Morse

City Skokie State IL Zip Code 60077

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

Name of Employer Self-employed Occupation Healthcare Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2014

Transaction ID : SA11AI.12371

Amount of Each Receipt this Period
50.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Claude Lucchesi

Mailing Address 127 Riverside

City Northfield State IL Zip Code 60093

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

Name of Employer ASL/IMSERC Occupation Consulting Director, Lab at Northweste

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.12695

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Amy Masters

Mailing Address 1930 West Roscoe #2

City Chicago State IL Zip Code 60657

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

Name of Employer AmCreative Design Occupation Designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 23 / 2014

Transaction ID : SA11AI.12455

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Michael McNamara

Mailing Address 1800 Kirk Street

City Evanston State IL Zip Code 60202

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

Name of Employer Interior Effects Inc. Occupation Interior Designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 17 / 2014

Transaction ID : SA11AI.12746

Amount of Each Receipt this Period
200.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jacob Meister

Mailing Address 2427 West Charleston

City Chicago State IL Zip Code 60647

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12904

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Richard Mesirow

Mailing Address 160 Cary Avenue

City Highland Park State IL Zip Code 60035

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

Name of Employer Mesirow Financial Occupation Investor Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.12722

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
John Metz

Mailing Address 1215 Greenleaf

City Evanston State IL Zip Code 60202

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2014

Transaction ID : SA11AI.12360

Amount of Each Receipt this Period
500.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Elizabeth Mitchell

Mailing Address 1738 Chicago Ave., #601

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12762

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Catherine Moran

Mailing Address 4713 N. LaPorte

City State Zip Code
Chicago IL 60630

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

Name of Employer Occupation
SAP Global Software Co.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.12732

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Gail H Morse

Mailing Address 3739 N. Wilton Ave. #2

City State Zip Code
Chicago IL 60613

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

Name of Employer Occupation
Jenner & Block Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12761

Amount of Each Receipt this Period
1000.00

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

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

1400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

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

Mailing Address 7360 N. Seeley Avenue #1

City Chicago State IL Zip Code 60645

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

Name of Employer Self-employed Occupation Advocacy & Policy Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12879

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mary Morten

Mailing Address 7360 N. Seeley Avenue #1

City Chicago State IL Zip Code 60645

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

Name of Employer Self-employed Occupation Advocacy & Policy Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12913

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Katherine Nathan

Mailing Address 2116 West Pratt

City Chicago State IL Zip Code 60645

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

Name of Employer On Demand Resources Occupation Project Manager, Senior Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12775

Amount of Each Receipt this Period
150.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert Newhart

Mailing Address 828 West Waveland #3S

City Chicago State IL Zip Code 60613

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

Name of Employer Single Source, Inc Occupation Vice President & CIO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : SA11AI.12444

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Robert Newhart

Mailing Address 828 West Waveland #3S

City Chicago State IL Zip Code 60613

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

Name of Employer Single Source, Inc Occupation Vice President & CIO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
310.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.12748

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Kelly Norton

Mailing Address 1315 Elmwood

City Evanston State IL Zip Code 60201

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

Name of Employer AbbVie Occupation Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11AI.12685

Amount of Each Receipt this Period
500.00

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

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

660.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Maria Ojeda

Mailing Address 150 W. Eugenie Street #28

City Chicago State IL Zip Code 60614

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

Name of Employer Baird & Warner Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12669

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Inez Okrent

Mailing Address 1212 Austin

City Evanston State IL Zip Code 60202

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

Name of Employer Washington School District 65 Occupation Art Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12598

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Susan Oppenheimer

Mailing Address 1501 North State #11B

City Chicago State IL Zip Code 60610

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

Name of Employer Self-employed Occupation Organization Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12877

Amount of Each Receipt this Period
1000.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Susan Pastin

Mailing Address 1340 W. Touhy Avenue #405

City Chicago State IL Zip Code 60626

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

Name of Employer US Railroad Retirement Board Occupation Claims Examiner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.12750

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Alyx Pattison

Mailing Address 1111 N. Western #2S

City Chicago State IL Zip Code 60622

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1650.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.12473

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Lucia Pengson

Mailing Address 30907 Riverton Lane

City Temecula State CA Zip Code 92591

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

Name of Employer Self-employed Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.12729

Amount of Each Receipt this Period
500.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Aurie Pennick

Mailing Address 1480 Potawatomi Road

City Grayslake State IL Zip Code 60030

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

Name of Employer Field Museum Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12594

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
James Perry

Mailing Address 2630 Parkwyn Drive

City Kalamazoo State MI Zip Code 49008

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

Name of Employer Self-employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12862

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Tanya Pietrkowski

Mailing Address 2911 West Sherwin

City Chicago State IL Zip Code 60645

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

Name of Employer CARPLS Legal Aid Occupation Fundraiser

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.12749

Amount of Each Receipt this Period
75.00

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

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

425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Hedy Ratner

Mailing Address 8 S. Michigan #400

City Chicago State IL Zip Code 60603

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

Name of Employer Women's Business Development Center Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1818.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : SA11AI.12464

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Stephen Regenstreif

Mailing Address 3214 38th Street NW

City Washington State DC Zip Code 20016

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.12321

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Kalman Resnick

Mailing Address 1322 Davis

City Evanston State IL Zip Code 60201

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

Name of Employer Hughes Socol Piers Resnick Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.12472

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Elaine Reuben

Mailing Address 1901 Wyoming Avenue NW

City Washington State DC Zip Code 20009

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.12786

Amount of Each Receipt this Period
500.00

Conduit: J Street PAC

B. Full Name (Last, First, Middle Initial)
Elsbeth Revere

Mailing Address 4116 N. Hermitage

City Chicago State IL Zip Code 60613

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

Name of Employer MacArthur Foundation Occupation Vice President, General Program

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12766

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Laura Ricketts

Mailing Address 1615 W. Rosehill Drive

City Chicago State IL Zip Code 60660

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

Name of Employer Ecotravel LLC Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.12858

Amount of Each Receipt this Period
500.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Genita Robinson		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 09 / 2014
Mailing Address 801 South Plymouth Court, Unit 101		Transaction ID : SA11AI.12315
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-employed	Occupation Consultant	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. John Rogers		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2014
Mailing Address 200 East Randolph #2900		Transaction ID : SA11AI.12917
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Ariel Capital	Occupation Chairman & CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Abbey Romanek		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2014
Mailing Address 1716 Washington		Transaction ID : SA11AI.12745
City Wilmette	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self-employed	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1600.00	

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 150			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/>
	12	13a	13b	14	15

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)
SCHAKOWSKY FOR CONGRESS

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

Mailing Address 2202 N. Orchard Street

City Chicago State IL Zip Code 60614

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

Name of Employer Self-employed Occupation Futures Trader

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.12809

Amount of Each Receipt this Period
1600.00

B. Full Name (Last, First, Middle Initial)
Mike Rothman

Mailing Address Rt. 1 Box 675

City Mount Prospect State IL Zip Code 60056

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

Name of Employer Pritec Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12713

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ann Rothschild

Mailing Address 5825 S. Dorchester Avenue #7W

City Chicago State IL Zip Code 60637

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : SA11AI.12311

Amount of Each Receipt this Period
200.00

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

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

1900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Adelaide Rowe

Mailing Address 2406 Grant

City Evanston State IL Zip Code 60201

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

Name of Employer Elk Grove Village Occupation Librarian

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12659

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Emma Ruby-Sachs

Mailing Address 2610 N. Sawyer Avenue

City Chicago State IL Zip Code 60647

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

Name of Employer Huffington Post Occupation Blogger

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12886

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Nettie Sabin

Mailing Address 4322 N Mozart

City Chicago State IL Zip Code 60618

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12888

Amount of Each Receipt this Period
200.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jane Saks

Mailing Address 2610 N. Sawyer Avenue

City Chicago State IL Zip Code 60647

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

Name of Employer Self-employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12891

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Paul Saltzman

Mailing Address 415 E. North Water St #W605/606

City Chicago State IL Zip Code 60611

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

Name of Employer Union Medical Center Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12861

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Christine Salvator

Mailing Address 6701 N. Bosworth Avenue

City Chicago State IL Zip Code 60626

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

Name of Employer Swedish Covenant Hospital Occupation Nurse Anesthetist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 31 / 2014

Transaction ID : SA11AI.12705

Amount of Each Receipt this Period
350.00

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

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Linda Sargon-Swenson

Mailing Address 8127 Kenton Ave.

City State Zip Code
Skokie IL 60007

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

Name of Employer Occupation
IL Secretary of State Auditor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12710

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Kim Savage

Mailing Address 7706 Brookhaven

City State Zip Code
Darien IL 60561

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

Name of Employer Occupation
Self-employed Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12610

Amount of Each Receipt this Period
50.00

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

Mailing Address 680 N. Lake Shore Drive #2100

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation
Jewish Federation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11AI.12686

Amount of Each Receipt this Period
200.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ashish Sen

Mailing Address 2557 W. Farewell Avenue

City Chicago State IL Zip Code 60645

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1950.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12565

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Kay Shannon

Mailing Address 530 Hinman Avenue

City Evanston State IL Zip Code 60202

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12602

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Daniel Shomon

Mailing Address 33 W. Monroe, 17th Floor

City Chicago State IL Zip Code 60603

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

Name of Employer Self-employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA11AI.12519

Amount of Each Receipt this Period
500.00

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

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

640.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Debra Shore

Mailing Address 9232 Avers Avenue

City State Zip Code
Evanston IL 60203

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

Name of Employer Occupation
Water Reclamation Commission Commissioner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.12837

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Alan Sieroty

Mailing Address 6022 Wilshire Blvd., #201

City State Zip Code
Los Angeles CA 90036

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

Name of Employer Occupation
Sieroty Co., Inc. Real Estate Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.12319

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Alan Sindelar

Mailing Address 9055 N. Grace Avenue

City State Zip Code
Niles IL 60714

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

Name of Employer Occupation
Maron Electrical Company Electrician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.12320

Amount of Each Receipt this Period
50.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Erica Sitkoff

Mailing Address 2800 N. Orchard #705

City Chicago State IL Zip Code 60657

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

Name of Employer DLA Piper Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.12480

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Geraldine Sizemore

Mailing Address 9201 Drake #407S

City Evanston State IL Zip Code 60203

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA11AI.12524

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Stan Sloan

Mailing Address 1406 N. Paulina

City Chicago State IL Zip Code 60622

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

Name of Employer Chicago House Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.12741

Amount of Each Receipt this Period
100.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sean Smith		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1913 N. Williamsburg		Transaction ID : SA11AI.12887
City Hoffman Estates	State IL Zip Code 60169	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self-employed	Occupation Consultant	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. David Soglin		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2014
Mailing Address 638 Judson		Transaction ID : SA11AI.12831
City Evanston	State IL Zip Code 60202	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Stroger Hospital	Occupation Physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Lawrence Sondler		Date of Receipt M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 2147 W. Farwell		Transaction ID : SA11AI.12487
City Chicago	State IL Zip Code 60645	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Northwestern Memorial Hospital	Occupation Mental Health Administrator	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lawrence Sondler

Mailing Address 2147 W. Farwell

City Chicago State IL Zip Code 60645

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

Name of Employer Northwestern Memorial Hospital Occupation Mental Health Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.12615

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Jennifer Amdur Spitz

Mailing Address 1940 West Irving Park Road #201

City Chicago State IL Zip Code 60613

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

Name of Employer Self-employed Occupation Communications Consulting

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 09 / 2014

Transaction ID : SA11AI.12547

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ronna Stamm

Mailing Address 101 Hamilton Street

City Evanston State IL Zip Code 60202

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

Name of Employer Self-employed Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12764

Amount of Each Receipt this Period
1000.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Linda Stevenson

Mailing Address 2522 Hartzell

City Evanston State IL Zip Code 60201

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

Name of Employer Self-employed Occupation Garden Designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11AI.12382

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Harriet Stone

Mailing Address 8312 Kilbourn Avenue

City Skokie State IL Zip Code 60076

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12779

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Howard Suskin

Mailing Address 353 N. Clark Street

City Chicago State IL Zip Code 60654

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

Name of Employer Jenner & Block Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.12840

Amount of Each Receipt this Period
200.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Grace Tarini

Mailing Address 1131 Forest

City State Zip Code
Evanston IL 60202

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : SA11AI.12778

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mark Tendam

Mailing Address 2448 Lincolnwood Drive

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
Self-employed Graphic Design

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2014

Transaction ID : SA11AI.12636

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mark Tendam

Mailing Address 2448 Lincolnwood Drive

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
Self-employed Graphic Design

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.12884

Amount of Each Receipt this Period
500.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Marjorie Tick

Mailing Address 2550 Harbourside Drive

City State Zip Code
Longboat Key FL 34228

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.12324

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Tisdahl

Mailing Address 2 Martha Lane

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
Evanston IL Mayor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12768

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Kathy Tisdahl

Mailing Address 1317 Livingston

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
Congaree River Ltd Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2014

Transaction ID : SA11AI.12369

Amount of Each Receipt this Period
500.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
George Van Dusen

Mailing Address 9513 Tripp

City Skokie State IL Zip Code 60204

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

Name of Employer Village of Skokie Occupation Mayor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 11 / 2014

Transaction ID : SA11AI.12345

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Rikke Vognsen

Mailing Address 3816 North Marshfield Avenue

City Chicago State IL Zip Code 60613

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

Name of Employer Crown Advisors Occupation Executive Search

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **405.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 22 / 2014

Transaction ID : SA11AI.12429

Amount of Each Receipt this Period
5.00

C. Full Name (Last, First, Middle Initial)
Rikke Vognsen

Mailing Address 3816 North Marshfield Avenue

City Chicago State IL Zip Code 60613

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

Name of Employer Crown Advisors Occupation Executive Search

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **410.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 22 / 2014

Transaction ID : SA11AI.12678

Amount of Each Receipt this Period
5.00

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

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

60.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rikke Vognsen

Mailing Address 3816 North Marshfield Avenue

City Chicago State IL Zip Code 60613

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

Name of Employer Crown Advisors Occupation Executive Search

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
415.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 21 / 2014

Transaction ID : SA11AI.12800

Amount of Each Receipt this Period
5.00

B. Full Name (Last, First, Middle Initial)
Stephen Warner

Mailing Address 1201 Harvard Terrace

City Evanston State IL Zip Code 60202

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

Name of Employer Woodward Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.12754

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Margaret Warren

Mailing Address 19 N. Delphia

City Park Ridge State IL Zip Code 60068

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : SA11AI.12310

Amount of Each Receipt this Period
250.00

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

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

355.00

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

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

FOR LINE NUMBER: PAGE 68 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Margaret Warren

Mailing Address 19 N. Delphia

City State Zip Code
Park Ridge IL 60068

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12769

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Roberta Washlow

Mailing Address 700 N. Green Bay Road

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Occupation
Self-employed Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.12776

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Bill Weeks

Mailing Address 5674 N. Ridge, Apt. 3S

City State Zip Code
Chicago IL 60660

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

Name of Employer Occupation
Chicago Public Schools Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : SA11AI.12402

Amount of Each Receipt this Period
300.00

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 69 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Bill Weeks

Mailing Address 5674 N. Ridge, Apt. 3S

City Chicago State IL Zip Code 60660

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

Name of Employer Chicago Public Schools Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12893

Amount of Each Receipt this Period
 _____ 300.00

B. Full Name (Last, First, Middle Initial)
Phyllis Kay Whitlock

Mailing Address 3470 North Lake Shore Drive #7C

City Chicago State IL Zip Code 60657

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

Name of Employer Christopher Burke Engineering Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA11AI.12522

Amount of Each Receipt this Period
 _____ 50.00

C. Full Name (Last, First, Middle Initial)
Janice Wiley

Mailing Address 9530 North Lamon Place, #320

City Skokie State IL Zip Code 60077

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.12475

Amount of Each Receipt this Period
 _____ 100.00

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

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

_____ 450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 150
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Laura Wilhelm

Mailing Address 2901 West Farragut, #1S

City Chicago State IL Zip Code 60625

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

Name of Employer Self-employed Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 21 / 2014

Transaction ID : SA11AI.12793

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Eileen Willenborg

Mailing Address 11640 Prospect Drive

City New Buffalo State MI Zip Code 49117

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 21 / 2014

Transaction ID : SA11AI.12424

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Eileen Willenborg

Mailing Address 11640 Prospect Drive

City New Buffalo State MI Zip Code 49117

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.12911

Amount of Each Receipt this Period
100.00

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

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

400.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 71 OF 150

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John Wroblewski

Mailing Address 900 Chicago Ave. #406

City State Zip Code
 Evanston IL 60202

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

Name of Employer Occupation
 Jakubs Wigoda LLP Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11AI.12534

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Mark Zivin

Mailing Address 1637 Judson Avenue

City State Zip Code
 Evanston IL 60201

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

Name of Employer Occupation
 Morrison & Morrison CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11AI.12503

Amount of Each Receipt this Period
 200.00

Conduit: J Street PAC

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)

Election Cycle-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).....

300.00

55647.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.13143

Amount of Each Receipt this Period
 582.70

Total Received Through Conduit This Period
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Air Line Pilots Association PAC

Mailing Address 1625 Massachusetts Ave., NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.12979

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
American Academy of Family Physicians PAC

Mailing Address 2021 Massachusetts Avenue NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00411553

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 9000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11C.12944

Amount of Each Receipt this Period
 2000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American Academy of Neurology Professional Association BRAINPAC

Mailing Address 401 C Street NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00435933

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.12972

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
American Association for Justice PAC

Mailing Address 777 6th Street NW #200

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.12973

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
American Association of Nurse Practioners PAC

Mailing Address P.O. Box 12846

City Austin State TX Zip Code 78711

FEC ID number of contributing federal political committee. **C** C00358903

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.12962

Amount of Each Receipt this Period
 1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American College of Physician Services PAC

Mailing Address 25 Massachusettes Ave., NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00403881

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11C.12935

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American College of Radiology Association PAC

Mailing Address 1891 Preston White Drive

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11C.12954

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
American Osteopathic Information Association-Osteopathic PAC

Mailing Address 1090 Vermont Ave. NW, Suite 510

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00113803

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA11C.12953

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 75 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American Postal Workers Union COPE

Mailing Address 1300 L Street, NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00010322**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11C.12948

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
American Psychological Association Practice Organization PAC (APAPO-PAC)

Mailing Address P.O. Box 65353

City Washington State DC Zip Code 20035

FEC ID number of contributing federal political committee. **C C00522094**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.12976

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Brotherhood of Railroad Signalmen Political Action Committee

Mailing Address 917 Shenandoah Shores Road

City Front Royal State VA Zip Code 22630

FEC ID number of contributing federal political committee. **C C00011262**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11C.12955

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 76 OF 150
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Brotherhood of Railroad Signalmen Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 917 Shenandoah Shores Road
 City State Zip Code
 Front Royal VA 22630
 FEC ID number of contributing federal political committee. **C** C00011262
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11C.12982
 Amount of Each Receipt this Period
 500.00

B. Citizens for Lou Lang
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 1815
 City State Zip Code
 Skokie IL 60076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014
Transaction ID : SA11C.12928
 Amount of Each Receipt this Period
 500.00

C. CULAC-The PAC OF Credit Union National Association
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 Pennsylvania Avenue NW #600
 City State Zip Code
 Washington DC 20004
 FEC ID number of contributing federal political committee. **C** C00007880
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014
Transaction ID : SA11C.12966
 Amount of Each Receipt this Period
 1000.00

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Cummins Inc. Political Action Committee (CIPAC)

Mailing Address 601 Pennsylvania Ave., NW Suite 1

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00377952

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11C.12941

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dentons US LLP PAC

Mailing Address 1301 K Street, NW, Suite 600E

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00216127

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : SA11C.12929

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Ecolab Inc. PAC

Mailing Address 370 Wabasha Street North

City St. Paul State MN Zip Code 55102

FEC ID number of contributing federal political committee. **C** C00101485

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.12975

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Engineers Political Education Committee (EPEC)/International Union of Operating Engineers

Mailing Address 1125 Seventeenth Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA11C.12951

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Entertainment Software Association PAC (ESA PAC)

Mailing Address 575 Seventh Street, NW Suite 300

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00439216

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.12970

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ford Motor Company Civic Action Fund

Mailing Address P.O. Box 75000

City Detroit State MI Zip Code 48275

FEC ID number of contributing federal political committee. **C** C00046474

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.12968

Amount of Each Receipt this Period
2000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Growth Energy PAC

Mailing Address 777 N. Capitol Street, NE Suite 8

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00475665

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11C.12971

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Humane Society Legislative Fund PAC

Mailing Address 2100 L Street NW #310

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00466813

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.12960

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Illinois Corn Growers Association Political Involvement Fund-Federal

Mailing Address P. O. Box 1623

City Bloomington State IL Zip Code 61702

FEC ID number of contributing federal political committee. **C** C00376590

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11C.12933

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
International Brotherhood of Electrical Workers PAC

Mailing Address 900 Seventh Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11C.12937

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
International Brotherhood of Electrical Workers PAC

Mailing Address 900 Seventh Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.12961

Amount of Each Receipt this Period
 4500.00

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

Mailing Address PO BOX 33106

City WASHINGTON State DC Zip Code 20033

FEC ID number of contributing federal political committee. **C** C00441949

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.13144

Amount of Each Receipt this Period
 750.00

Total Received Through Conduit This Period
[MEMO ITEM]

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kraft Foods Global Inc. PAC (KRAFTPAC)

Mailing Address 975 F Street NW, Suite 1000

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00077701

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA11C.12949

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Machinists Non-Partisan Political League PAC

Mailing Address 9000 Machinist Place

City Upper Marlboro State MD Zip Code 20772

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.12977

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
mCapitol Management/MWH Americas PAC

Mailing Address 380 Interlocken Crescent Suite 200

City Broomfield State CO Zip Code 80021

FEC ID number of contributing federal political committee. **C** C00242370

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11C.12947

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
National Association of Health Underwriters PAC (HUPAC)

Mailing Address 2000 N. 14th Street, Suite 450

City	State	Zip Code
Arlington	VA	22201

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.12958

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Assn PAC

Mailing Address 1101 King Street, Suite 600

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.12965

Amount of Each Receipt this Period
 _____ 2500.00

C. Full Name (Last, First, Middle Initial)
National Cable and Telecommunications Assn PAC

Mailing Address 1724 Massachusetts Avenue NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11C.12956

Amount of Each Receipt this Period
 _____ 2000.00

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

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

_____ 5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEA Fund for Children & Public Education

Mailing Address 1201-16th Street, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11C.12932

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
PAC of the American Association of Orthopaedic Surgeons

Mailing Address 317 Massachusetts Ave., NE 1st Fl

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11C.12936

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Sierra Club Political Committee

Mailing Address 85 Second Street 2nd Floor

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C** C00135368

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.12964

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 84 OF 150
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)
 Mailing Address P.O. Box 96920
 City State Zip Code
 Washington DC 20090
 FEC ID number of contributing federal political committee. **C C00364158**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 8500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 24 2014
Transaction ID : SA11C.12934
 Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)
 Mailing Address P.O. Box 96920
 City State Zip Code
 Washington DC 20090
 FEC ID number of contributing federal political committee. **C C00364158**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2014
Transaction ID : SA11C.12978
 Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
Transport Workers Union PCC
 Mailing Address 501 Third Street NW 9th Floor
 City State Zip Code
 Washington DC 20001
 FEC ID number of contributing federal political committee. **C C00008268**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 16 2014
Transaction ID : SA11C.12931
 Amount of Each Receipt this Period
 1500.00

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Transport Workers Union PCC

Mailing Address 501 Third Street NW 9th Floor

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00008268**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11C.12957

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
TRW Good Government Fund

Mailing Address 12001 Tech Center Drive

City Livonia State MI Zip Code 48150

FEC ID number of contributing federal political committee. **C C00025536**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 05 / 2014

Transaction ID : SA11C.12946

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
U.S. Travel Association PAC

Mailing Address 1100 New York Avenue, NW Ste. 450

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00457754**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2014

Transaction ID : SA11C.12943

Amount of Each Receipt this Period
2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
United Transportation Union (UTU) PAC

Mailing Address 14600 Detroit Avenue

City Cleveland State OH Zip Code 44107

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.12981

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
University Public Issues Committee

Mailing Address P.O. Box 62

City Evanston State IL Zip Code 60204

FEC ID number of contributing federal political committee. **C** C00404137

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11C.12939

Amount of Each Receipt this Period
 1000.00

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)

Election Cycle-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).....

2000.00

67500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ADP

Mailing Address 100 N. Northwest Pt. Road

City Elk Grove Village State IL Zip Code 60007

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
516.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA14.12924

Amount of Each Receipt this Period
186.31

Payroll Tax Credit

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)

Election Cycle-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)

Election Cycle-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).....

186.31

186.31

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 150
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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)
SCHAKOWSKY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Franklin Templeton Investments

Mailing Address PO Box 33030

City St. Petersburg State FL Zip Code 33733

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
523.63

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014

Transaction ID : SA15.12925

Amount of Each Receipt this Period
26.67

Interest

B. Full Name (Last, First, Middle Initial)
Franklin Templeton Investments

Mailing Address PO Box 33030

City St. Petersburg State FL Zip Code 33733

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.56

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA15.12920

Amount of Each Receipt this Period
26.93

Interest

C. Full Name (Last, First, Middle Initial)
Franklin Templeton Investments

Mailing Address PO Box 33030

City St. Petersburg State FL Zip Code 33733

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
577.39

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA15.12922

Amount of Each Receipt this Period
26.83

Interest

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

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

80.43

80.43

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 5.47 Transaction ID : SB17.12992
City Somerville State MA Zip Code 02144	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 0.34 Transaction ID : SB17.12991
City Somerville State MA Zip Code 02144	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 0.04 Transaction ID : SB17.12990
City Somerville State MA Zip Code 02144	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 5.57 Transaction ID : SB17.12988
City Somerville State MA Zip Code 02144	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 7.90 Transaction ID : SB17.12987
City Somerville State MA Zip Code 02144	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 0.17 Transaction ID : SB17.12986
City Somerville State MA Zip Code 02144	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement
Mailing Address 366 Summer Street		M M / D D / Y Y Y Y 08 / 24 / 2014
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Credit Card Processing Fees	Candidate Name	Amount of Each Disbursement this Period 1.74
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement
Mailing Address 366 Summer Street		M M / D D / Y Y Y Y 09 / 11 / 2014
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Credit Card Processing Fees	Candidate Name	Amount of Each Disbursement this Period 1.79
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement
Mailing Address 366 Summer Street		M M / D D / Y Y Y Y 09 / 19 / 2014
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Credit Card Processing Fees	Candidate Name	Amount of Each Disbursement this Period 0.17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3.70
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 0.04 Transaction ID : SB17.12984
City Somerville State MA Zip Code 02144	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 92.98 Transaction ID : SB17.12999
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Processing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 587.75 Transaction ID : SB17.12996
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	680.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 97.98
City Elk Grove Village	State IL Zip Code 60007	
Purpose of Disbursement Payroll Processing	Candidate Name	Transaction ID : SB17.12998
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 587.75
City Elk Grove Village	State IL Zip Code 60007	
Purpose of Disbursement Payroll Taxes	Candidate Name	Transaction ID : SB17.12994
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 97.98
City Elk Grove Village	State IL Zip Code 60007	
Purpose of Disbursement Payroll Processing	Candidate Name	Transaction ID : SB17.13000
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	783.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 582.56 Transaction ID : SB17.13001
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 97.98 Transaction ID : SB17.13005
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Processing Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 850.17 Transaction ID : SB17.12995
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1530.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 107.98 Transaction ID : SB17.13004
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Processing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 1762.88 Transaction ID : SB17.13002
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 112.98 Transaction ID : SB17.13003
City Elk Grove Village State IL Zip Code 60007	Purpose of Disbursement Payroll Processing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1983.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 100 N. Northwest Pt. Road		Amount of Each Disbursement this Period 1975.87 Transaction ID : SB17.12997
City State Zip Code Elk Grove Village IL 60007	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Age Options		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1048 Lake Street		Amount of Each Disbursement this Period 125.00 Transaction ID : SB17.13007
City State Zip Code Oak Park IL 60301	Purpose of Disbursement Event Tickets	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. A Just Harvest		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address P.O. Box 608033		Amount of Each Disbursement this Period 166.66 Transaction ID : SB17.12983
City State Zip Code Chicago IL 60626	Purpose of Disbursement Advertisement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2267.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Express			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014	
Mailing Address P.O. Box 981540			Amount of Each Disbursement this Period 5.25	
City El Paso	State TX	Zip Code 79998	Transaction ID : SB17.13008	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. American Express			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014	
Mailing Address P.O. Box 981540			Amount of Each Disbursement this Period 21.00	
City El Paso	State TX	Zip Code 79998	Transaction ID : SB17.13010	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. American Express			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014	
Mailing Address P.O. Box 981540			Amount of Each Disbursement this Period 8.55	
City El Paso	State TX	Zip Code 79998	Transaction ID : SB17.13011	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	34.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. Box 981540		Amount of Each Disbursement this Period 4.64
City El Paso	State TX	
Zip Code 79998	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : SB17.13009
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Armour, Alex		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1940 W. Lawrence #3W		Amount of Each Disbursement this Period 2708.33
City Chicago	State IL	
Zip Code 60640	Purpose of Disbursement Salary	Transaction ID : SB17.13016
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Armour, Alex		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 1940 W. Lawrence #3W		Amount of Each Disbursement this Period 2708.33
City Chicago	State IL	
Zip Code 60640	Purpose of Disbursement Salary	Transaction ID : SB17.13015
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5421.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 150		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Armour, Alex		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 1940 W. Lawrence #3W		Amount of Each Disbursement this Period 2708.33 Transaction ID : SB17.13012
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Armour, Alex		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 1940 W. Lawrence #3W		Amount of Each Disbursement this Period 2708.33 Transaction ID : SB17.13013
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Armour, Alex		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1940 W. Lawrence #3W		Amount of Each Disbursement this Period 2708.33 Transaction ID : SB17.13017
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8124.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Armour, Alex		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1940 W. Lawrence #3W		Amount of Each Disbursement this Period 2708.33 Transaction ID : SB17.13014
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 457.00 Transaction ID : SB17.13022
City Dallas	State TX Zip Code 75202	
Purpose of Disbursement Telephone & Internet Service	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.13019
City Dallas	State TX Zip Code 75202	
Purpose of Disbursement Telephone & Internet Service	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3210.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 460.85 Transaction ID : SB17.13020
City Dallas	State TX	
Zip Code 75202	Purpose of Disbursement Telephone & Internet Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.13021
City Dallas	State TX	
Zip Code 75202	Purpose of Disbursement Telephone & Internet Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 508.30 Transaction ID : SB17.13018
City Dallas	State TX	
Zip Code 75202	Purpose of Disbursement Telephone & Internet Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1014.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.13023
City Dallas State TX Zip Code 75202	Purpose of Disbursement Telephone & Internet Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 459.92 Transaction ID : SB17.13025
City Dallas State TX Zip Code 75202	Purpose of Disbursement Telephone & Internet Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 379.64 Transaction ID : SB17.13024
City Dallas State TX Zip Code 75202	Purpose of Disbursement Telephone & Internet Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	884.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 351.89 Transaction ID : SB17.13026
City Dallas	State TX	
Zip Code 75202	Purpose of Disbursement Telephone & Internet Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 915 S. 500 East #200		Amount of Each Disbursement this Period 34.60 Transaction ID : SB17.13027
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 915 S. 500 East #200		Amount of Each Disbursement this Period 36.80 Transaction ID : SB17.13028
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	423.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 915 S. 500 East #200		Amount of Each Disbursement this Period 33.60 Transaction ID : SB17.13029
City American Fork	State UT	
Zip Code 84003	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Blue Cross Blue Shield of IL		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address PO Box 1364		Amount of Each Disbursement this Period 1352.86 Transaction ID : SB17.13030
City Chicago	State IL	
Zip Code 60690	Purpose of Disbursement Health Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BRAD ASHFORD FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address PO BOX 24023		Amount of Each Disbursement this Period 497.70 Transaction ID : SB17.13032
City OMAHA	State NE	
Zip Code 68124	Purpose of Disbursement Travel Expenses	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NE District: 02	

SUBTOTAL of Disbursements This Page (optional).....	1884.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Broadway 55 LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 36 W. Rudolf #800		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.13033
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Office Rent	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chase Card Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 53084		Amount of Each Disbursement this Period 6270.00 Transaction ID : SB17.12187
City Atlanta	State GA Zip Code 30353	
Purpose of Disbursement Itemized Transactions Below	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 4610 North Clark Street		Amount of Each Disbursement this Period 323.85 Transaction ID : SB17.12187.0 [MEMO ITEM]
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7470.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1612 Sherman Avenue		Amount of Each Disbursement this Period 238.14
City Evanston	State IL	
Zip Code 60201	Purpose of Disbursement Office Supplies	Transaction ID : SB17.12187.1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Target		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1154 S. Clark Street		Amount of Each Disbursement this Period 47.94
City Chicago	State IL	
Zip Code 60605	Purpose of Disbursement Office Supplies	Transaction ID : SB17.12187.2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. House of Rental		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1766 Waukegan Rd		Amount of Each Disbursement this Period 485.00
City Glenview	State IL	
Zip Code 60025	Purpose of Disbursement Equipment Rental	Transaction ID : SB17.12187.4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1101 Davis		Amount of Each Disbursement this Period 980.00
City Evanston	State IL	
Zip Code 60201	Purpose of Disbursement Postage	Transaction ID : SB17.12187.5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1601 Trapelo Road #329		Amount of Each Disbursement this Period 79.69
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Email Service	Transaction ID : SB17.12187.8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Ampco Park		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 111 W. Jackson Blvd.		Amount of Each Disbursement this Period 120.00
City Chicago	State IL	
Zip Code 60604	Purpose of Disbursement Parking	Transaction ID : SB17.12187.9
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Chicago		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address P.O. Box 66142		Amount of Each Disbursement this Period 51.90
City Chicago	State IL	
Zip Code 60660	Purpose of Disbursement Parking	Transaction ID : SB17.12187.10
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. J2Fax		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 6922 Hollywood Blvd. 5th Floor		Amount of Each Disbursement this Period 16.95
City Los Angeles	State CA	
Zip Code 90028	Purpose of Disbursement Fax Service	Transaction ID : SB17.12187.14
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Walgreens		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 635 Chicago Avenue		Amount of Each Disbursement this Period 57.44
City Evanston	State IL	
Zip Code 60202	Purpose of Disbursement Office Supplies	Transaction ID : SB17.12187.15
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wired for Change		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1700 Connecticut Ave NW #403		Amount of Each Disbursement this Period 350.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Website Maintenance	Transaction ID : SB17.12187.17 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jewel		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1128 Chicago		Amount of Each Disbursement this Period 161.36
City Evanston State IL Zip Code 60202	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.12187.18 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CVS		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 5205 N Broadway Street		Amount of Each Disbursement this Period 4.59
City Chicago State IL Zip Code 60640	Purpose of Disbursement Office Supplies	Transaction ID : SB17.12187.20 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Enterprise Rent-A-Car		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2636 Green Bay Rd		Amount of Each Disbursement this Period 317.14
City Evanston	State IL	
Zip Code 60201		
Purpose of Disbursement Vehicle Rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Pasteur		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 5525 N. Broadway Street		Amount of Each Disbursement this Period 367.50
City Chicago	State IL	
Zip Code 60640		
Purpose of Disbursement Food and Beverage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 942 Shady Grove Road		Amount of Each Disbursement this Period 69.86
City Memphis	State TN	
Zip Code 38120		
Purpose of Disbursement Shipping		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Courtyard by Marriott Navy Yard		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 140 L Street SE		Amount of Each Disbursement this Period 342.36
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Travel Expenses	Transaction ID : SB17.12187.34
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Sopraffina		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 222 West Adams Street		Amount of Each Disbursement this Period 791.89
City Chicago	State IL	
Zip Code 60606	Purpose of Disbursement Catering	Transaction ID : SB17.12187.35
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Carnivale		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 702 W. Fulton Market		Amount of Each Disbursement this Period 1000.00
City Chicago	State IL	
Zip Code 60661	Purpose of Disbursement Catering	Transaction ID : SB17.12187.36
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AOL		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 770 Broadway		Amount of Each Disbursement this Period 20.99
City New York	State NY	
Zip Code 10003	Purpose of Disbursement Internet Service	Transaction ID : SB17.12187.37
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Chase Card Services		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address PO Box 53084		Amount of Each Disbursement this Period 4486.30
City Atlanta	State GA	
Zip Code 30353	Purpose of Disbursement Itemized Transactions Below	Transaction ID : SB17.12238
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Walgreens		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 635 Chicago Avenue		Amount of Each Disbursement this Period 28.94
City Evanston	State IL	
Zip Code 60202	Purpose of Disbursement Office Supplies	Transaction ID : SB17.12238.0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4486.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Enterprise Rent-A-Car		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 2636 Green Bay Rd		Amount of Each Disbursement this Period 634.28
City Evanston	State IL	
Zip Code 60201	Purpose of Disbursement Vehicle Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 710.26
City Dallas	State TX	
Zip Code 75202	Purpose of Disbursement Telephone Equipment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Max		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 1612 Sherman Avenue		Amount of Each Disbursement this Period 252.88
City Evanston	State IL	
Zip Code 60201	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 1601 Trapelo Road #329		Amount of Each Disbursement this Period 79.69
City Waltham State MA Zip Code 02451	Purpose of Disbursement Email Service	
Candidate Name	Category/Type	Transaction ID : SB17.12238.7 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. City of Chicago		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address P.O. Box 66142		Amount of Each Disbursement this Period 18.00
City Chicago State IL Zip Code 60660	Purpose of Disbursement Parking	
Candidate Name	Category/Type	Transaction ID : SB17.12238.11 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ampco Park		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 111 W. Jackson Blvd.		Amount of Each Disbursement this Period 28.00
City Chicago State IL Zip Code 60604	Purpose of Disbursement Parking	
Candidate Name	Category/Type	Transaction ID : SB17.12238.12 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. J2Fax		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 6922 Hollywood Blvd. 5th Floor		Amount of Each Disbursement this Period 16.95
City Los Angeles	State CA	
Purpose of Disbursement Fax Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Wired for Change		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 1700 Connecticut Ave NW #403		Amount of Each Disbursement this Period 350.00
City Washington	State DC	
Purpose of Disbursement Website Maintenance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) c. Ben's Noodles & Rice		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 1139 W. Bryn Mawr Ave.		Amount of Each Disbursement this Period 91.54
City Chicago	State IL	
Purpose of Disbursement Food and Beverage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Johnny's Half Shell		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 400 North Capitol Street NW		Amount of Each Disbursement this Period 455.00
City Washington State DC Zip Code 20001	Purpose of Disbursement Catering	
Candidate Name		Transaction ID : SB17.12238.25 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. O'Hare Airport		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 10000 W. O'Hare Avenue		Amount of Each Disbursement this Period 36.00
City Chicago State IL Zip Code 60666	Purpose of Disbursement Travel Expense	
Candidate Name		Transaction ID : SB17.12238.27 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address P.O. Box 66100		Amount of Each Disbursement this Period 180.00
City Chicago State IL Zip Code 60666	Purpose of Disbursement Travel Expenses	
Candidate Name		Transaction ID : SB17.12238.28 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AOL		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 770 Broadway		Amount of Each Disbursement this Period 4,463.10 Transaction ID : SB17.12238.29
City New York	State NY	
Zip Code 10003	Purpose of Disbursement Internet Service	[MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Carnivale		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 702 W. Fulton Market		Amount of Each Disbursement this Period 1,650.91 Transaction ID : SB17.12238.30
City Chicago	State IL	
Zip Code 60661	Purpose of Disbursement Food and Beverage	[MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Chase Card Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address PO Box 53084		Amount of Each Disbursement this Period 4,463.10 Transaction ID : SB17.12275
City Atlanta	State GA	
Zip Code 30353	Purpose of Disbursement Itemized Transactions Below	[MEMO ITEM]
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4463.10
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Heckys BBQ		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 1902 Green Bay Road		Amount of Each Disbursement this Period 2943.06
City Evanston	State IL	
Zip Code 60201	Purpose of Disbursement Catering	Transaction ID : SB17.12275.0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. House of Rental		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 1766 Waukegan Rd		Amount of Each Disbursement this Period 52.00
City Glenview	State IL	
Zip Code 60025	Purpose of Disbursement Equipment Rental	Transaction ID : SB17.12275.1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Jewel		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 1128 Chicago		Amount of Each Disbursement this Period 147.34
City Evanston	State IL	
Zip Code 60202	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.12275.2
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 4610 North Clark Street		Amount of Each Disbursement this Period 245.46
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : SB17.12275.4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 1601 Trapelo Road #329		Amount of Each Disbursement this Period 79.69
City Waltham	State MA Zip Code 02451	
Purpose of Disbursement Email Service	Candidate Name	Transaction ID : SB17.12275.5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. J2Fax		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 6922 Hollywood Blvd. 5th Floor		Amount of Each Disbursement this Period 16.95
City Los Angeles	State CA Zip Code 90028	
Purpose of Disbursement Fax Service	Candidate Name	Transaction ID : SB17.12275.6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Koi Fine Asian Cuisine		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 624 Davis Street		Amount of Each Disbursement this Period 220.29
City Evanston	State IL	
Zip Code 60201	Purpose of Disbursement Catering	Transaction ID : SB17.12275.10
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. City of Chicago		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address P.O. Box 66142		Amount of Each Disbursement this Period 7.00
City Chicago	State IL	
Zip Code 60660	Purpose of Disbursement Parking	Transaction ID : SB17.12275.11
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Wired for Change		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 1700 Connecticut Ave NW #403		Amount of Each Disbursement this Period 750.00
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Website Maintenance	Transaction ID : SB17.12275.13
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 1612 Sherman Avenue		Amount of Each Disbursement this Period 71.91
City Evanston	State IL	
Zip Code 60201	Purpose of Disbursement Office Supplies	Transaction ID : SB17.12275.16
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address P.O. Box 66100		Amount of Each Disbursement this Period -497.00
City Chicago	State IL	
Zip Code 60666	Purpose of Disbursement Travel Expense Refund	Transaction ID : SB17.12275.19
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. AOL		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 770 Broadway		Amount of Each Disbursement this Period 20.99
City New York	State NY	
Zip Code 10003	Purpose of Disbursement Internet Service	Transaction ID : SB17.12275.20
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lucky Platter		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 514 Main Street		Amount of Each Disbursement this Period 35.79
City Evanston	State IL	
Zip Code 60202	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.12275.22
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 942 Shady Grove Road		Amount of Each Disbursement this Period 25.50
City Memphis	State TN	
Zip Code 38120	Purpose of Disbursement Shipping	Transaction ID : SB17.12275.23
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Chicago Jewish News		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 5301 W. Dempster		Amount of Each Disbursement this Period 276.25
City Skokie	State IL	
Zip Code 60076	Purpose of Disbursement Advertisement	Transaction ID : SB17.13034
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	276.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 124 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Flanagan, Emma		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 2025 Chestnut Avenue		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.13041
City Wilmette	State IL	
Zip Code 60691	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Flanagan, Emma		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 2025 Chestnut Avenue		Amount of Each Disbursement this Period 1083.33 Transaction ID : SB17.13042
City Wilmette	State IL	
Zip Code 60691	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Flanagan, Emma		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 2025 Chestnut Avenue		Amount of Each Disbursement this Period 1083.33 Transaction ID : SB17.13040
City Wilmette	State IL	
Zip Code 60691	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2666.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gallivan, Connor		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 7715 N. Hermitage #1-A		Amount of Each Disbursement this Period 541.66 Transaction ID : SB17.13045
City Chicago	State IL Zip Code 60626	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gallivan, Connor		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 7715 N. Hermitage #1-A		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.13044
City Chicago	State IL Zip Code 60626	
Purpose of Disbursement Mobile Phone	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.13044.0 [MEMO ITEM]
City Dallas	State TX Zip Code 75202	
Purpose of Disbursement Mobile Phone	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	591.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 150			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gallivan, Connor		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 7715 N. Hermitage #1-A		Amount of Each Disbursement this Period 1083.33 Transaction ID : SB17.13046
City Chicago	State IL Zip Code 60626	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gersten, Sarah		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3909 N. Sheridan #1H		Amount of Each Disbursement this Period 3875.00 Transaction ID : SB17.13050
City Chicago	State IL Zip Code 60613	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gersten, Sarah		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 3909 N. Sheridan #1H		Amount of Each Disbursement this Period 3875.00 Transaction ID : SB17.13051
City Chicago	State IL Zip Code 60613	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8833.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gersten, Sarah		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 3909 N. Sheridan #1H		Amount of Each Disbursement this Period 3875.00 Transaction ID : SB17.13048
City Chicago	State IL Zip Code 60613	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gersten, Sarah		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 3909 N. Sheridan #1H		Amount of Each Disbursement this Period 3875.00 Transaction ID : SB17.13047
City Chicago	State IL Zip Code 60613	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gersten, Sarah		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 3909 N. Sheridan #1H		Amount of Each Disbursement this Period 3875.00 Transaction ID : SB17.13052
City Chicago	State IL Zip Code 60613	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gersten, Sarah		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 3909 N. Sheridan #1H		Amount of Each Disbursement this Period 3875.00 Transaction ID : SB17.13049
City Chicago	State IL Zip Code 60613	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gould, Ben		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 6699 N. Olmsted #201		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.13056
City Chicago	State IL Zip Code 60631	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gould, Ben		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 6699 N. Olmsted #201		Amount of Each Disbursement this Period 1083.33 Transaction ID : SB17.13055
City Chicago	State IL Zip Code 60631	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5458.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gould, Ben		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 6699 N. Olmsted #201		Amount of Each Disbursement this Period 47.04
City Chicago	State IL Zip Code 60631	
Purpose of Disbursement Salary	Candidate Name	Transaction ID : SB17.13057
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Gould, Ben		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 6699 N. Olmsted #201		Amount of Each Disbursement this Period 43.68
City Chicago	State IL Zip Code 60631	
Purpose of Disbursement Salary	Candidate Name	Transaction ID : SB17.13058
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Gould, Ben		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 6699 N. Olmsted #201		Amount of Each Disbursement this Period 39.76
City Chicago	State IL Zip Code 60631	
Purpose of Disbursement Salary	Candidate Name	Transaction ID : SB17.13054
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	130.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 130 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gould, Ben		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 6699 N. Olmsted #201		Amount of Each Disbursement this Period 1083.33 Transaction ID : SB17.13059
City Chicago	State IL Zip Code 60631	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hainline, John Damon		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 1000 W. Argyle #3N		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.13061
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Hainline, John Damon		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1000 W. Argyle #3N		Amount of Each Disbursement this Period 489.93 Transaction ID : SB17.13063
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2573.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hainline, John Damon		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 1000 W. Argyle #3N		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.13064
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Mobile Phone		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 208 Akard Street		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.13064.0 [MEMO ITEM]
City Dallas	State TX Zip Code 75202	
Purpose of Disbursement Mobile Phone		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Hainline, John Damon		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 1000 W. Argyle #3N		Amount of Each Disbursement this Period 160.92 Transaction ID : SB17.13065
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Travel Expenses-Mileage & Parking		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	260.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hainline, John Damon		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1000 W. Argyle #3N		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.13066
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hainline, John Damon		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1000 W. Argyle #3N		Amount of Each Disbursement this Period 2166.67 Transaction ID : SB17.13062
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Joint Affairs Committee PAC		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address PO Box 105		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.13071
City Highland Park	State IL Zip Code 60035	
Purpose of Disbursement Membership Dues	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4666.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 133 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. J Street PAC		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address P.O. Box 33106		Amount of Each Disbursement this Period 6.50 Transaction ID : SB17.13070
City Washington	State DC	
Zip Code 20033	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. J Street PAC		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address P.O. Box 33106		Amount of Each Disbursement this Period 0.65 Transaction ID : SB17.13067
City Washington	State DC	
Zip Code 20033	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. J Street PAC		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address P.O. Box 33106		Amount of Each Disbursement this Period 16.41 Transaction ID : SB17.13069
City Washington	State DC	
Zip Code 20033	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	23.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 134 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. J Street PAC		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P.O. Box 33106		Amount of Each Disbursement this Period 0.81 Transaction ID : SB17.13068
City Washington	State DC	
Zip Code 20033	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. La Prairie, Dean		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 4453 N. Paulina		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.13072
City Chicago	State IL	
Zip Code 60640	Purpose of Disbursement Photography	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Limjoco, Ann		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 4953 Oakton Street #506		Amount of Each Disbursement this Period 76.83 Transaction ID : SB17.13075
City Skokie	State IL	
Zip Code 60077	Purpose of Disbursement Food and Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	327.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lincolnwood Chamber of Commerce			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 7001 N. Lawnbridge			Amount of Each Disbursement this Period 230.00	
City Lincolnwood	State IL	Zip Code 60072	Transaction ID : SB17.13076	
Purpose of Disbursement Membership Dues		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Mid-City Printing			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014	
Mailing Address 5526 W. Montrose			Amount of Each Disbursement this Period 240.00	
City Chicago	State IL	Zip Code 60641	Transaction ID : SB17.13079	
Purpose of Disbursement Printing		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Mid-City Printing			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address 5526 W. Montrose			Amount of Each Disbursement this Period 2022.00	
City Chicago	State IL	Zip Code 60641	Transaction ID : SB17.13078	
Purpose of Disbursement Printing		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2492.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mid-City Printing		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 5526 W. Montrose		Amount of Each Disbursement this Period 1294.00 Transaction ID : SB17.13080
City Chicago	State IL Zip Code 60641	
Purpose of Disbursement Printing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mid-City Printing		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 5526 W. Montrose		Amount of Each Disbursement this Period 220.00 Transaction ID : SB17.13077
City Chicago	State IL Zip Code 60641	
Purpose of Disbursement Printing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mobilize Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 1336 G Street SE		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.13082
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fieldwork Recruiting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4514.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Moneris		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 700 E. Lake Cook Road		Amount of Each Disbursement this Period 143.75 Transaction ID : SB17.13084
City Buffalo Grove	State IL	
Zip Code 60089	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Moneris		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 700 E. Lake Cook Road		Amount of Each Disbursement this Period 257.17 Transaction ID : SB17.13086
City Buffalo Grove	State IL	
Zip Code 60089	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Moneris		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 700 E. Lake Cook Road		Amount of Each Disbursement this Period 172.98 Transaction ID : SB17.13085
City Buffalo Grove	State IL	
Zip Code 60089	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	573.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Moneris		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 700 E. Lake Cook Road		Amount of Each Disbursement this Period 244.86 Transaction ID : SB17.13088
City Buffalo Grove	State IL	
Zip Code 60089	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Moneris		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 700 E. Lake Cook Road		Amount of Each Disbursement this Period 206.24 Transaction ID : SB17.13083
City Buffalo Grove	State IL	
Zip Code 60089	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Moneris		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 700 E. Lake Cook Road		Amount of Each Disbursement this Period 54.16 Transaction ID : SB17.13087
City Buffalo Grove	State IL	
Zip Code 60089	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	505.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Niles Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 7900 North Milwaukee		Amount of Each Disbursement this Period 215.00 Transaction ID : SB17.13089
City Niles State IL Zip Code 60714	Purpose of Disbursement Membership Dues	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Nulton, Christopher		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 3900 Connecticut Ave NW #402		Amount of Each Disbursement this Period 417.01 Transaction ID : SB17.13092
City Washington State DC Zip Code 20008	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Nulton, Christopher		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 3900 Connecticut Ave NW #402		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.13091
City Washington State DC Zip Code 20008	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	882.01
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Public Response Group		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 12400 Harlem Avenue		Amount of Each Disbursement this Period 1247.50 Transaction ID : SB17.13094
City Palos Heights	State IL Zip Code 60463	
Purpose of Disbursement Printing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Reyna, Rosa		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 5926 N. Artesian 1st Floor		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.13095
City Chicago	State IL Zip Code 60640	
Purpose of Disbursement Office Cleaning	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Standard Park		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 203 N. LaSalle Street		Amount of Each Disbursement this Period 480.00 Transaction ID : SB17.13099
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Parking	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1867.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Travelers		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address CL&Specialty Remittance Center		Amount of Each Disbursement this Period 1415.00 Transaction ID : SB17.13100
City Hartford	State CT Zip Code 06183	
Purpose of Disbursement Insurance	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Thompson, Darryl		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 925 Dempster		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.13105
City Evanston	State IL Zip Code 60201	
Purpose of Disbursement Salary	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Thompson, Darryl		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 925 Dempster		Amount of Each Disbursement this Period 1083.33 Transaction ID : SB17.13104
City Evanston	State IL Zip Code 60201	
Purpose of Disbursement Salary	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2998.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 142 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tuite, Jacque		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 2212 W. Palmer		Amount of Each Disbursement this Period 771.75 Transaction ID : SB17.13106
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tuite, Jacque		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 2212 W. Palmer		Amount of Each Disbursement this Period 771.75 Transaction ID : SB17.13107
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Tuite, Jacque		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 2212 W. Palmer		Amount of Each Disbursement this Period 771.75 Transaction ID : SB17.13109
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2315.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 150			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tuite, Jacque		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 2212 W. Palmer		Amount of Each Disbursement this Period 75.59
City Chicago	State IL	
Zip Code 60647	Purpose of Disbursement Food & Beverage	Transaction ID : SB17.13112
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Costco		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 7311 N. Melvina Avenue		Amount of Each Disbursement this Period 75.59
City Niles	State IL	
Zip Code 60714	Purpose of Disbursement Food and Beverage	Transaction ID : SB17.13112.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Tuite, Jacque		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 2212 W. Palmer		Amount of Each Disbursement this Period 771.75
City Chicago	State IL	
Zip Code 60647	Purpose of Disbursement Salary	Transaction ID : SB17.13110
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	847.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 144 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tuite, Jacque		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 2212 W. Palmer		Amount of Each Disbursement this Period 771.75 Transaction ID : SB17.13108
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tuite, Jacque		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 2212 W. Palmer		Amount of Each Disbursement this Period 273.02 Transaction ID : SB17.13111
City Chicago	State IL Zip Code 60647	
Purpose of Disbursement Food and Beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Treasure Island		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 911 Ridge Road		Amount of Each Disbursement this Period 273.02 Transaction ID : SB17.13111.0 [MEMO ITEM]
City Wilmette	State LA Zip Code 60091	
Purpose of Disbursement Food and Beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1044.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tuite, Jacque		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 2212 W. Palmer		Amount of Each Disbursement this Period 771.75 Transaction ID : SB17.13113
City Chicago	State IL	
Zip Code 60647	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Wide Eye Creative		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 411 Smith Street		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.13114
City Brooklyn	State NY	
Zip Code 11231	Purpose of Disbursement Website Maintenance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Winnetka-Northfield Township Chamber of Commerce		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 841 Spruce Street		Amount of Each Disbursement this Period 275.00 Transaction ID : SB17.13115
City Winnetka	State IL	
Zip Code 60093	Purpose of Disbursement Membership Dues	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1946.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 150	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Yes Promotions, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 750 N. Franklin		Amount of Each Disbursement this Period 6486.72
City Chicago	State IL Zip Code 60610	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : SB17.13116
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	6486.72
TOTAL This Period (last page this line number only).....	112158.85

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 150	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Astri Lindberg		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 2896 Sheridan Place		Amount of Each Disbursement this Period 75.00 Transaction ID : SB20A.13137
City Evanston	State IL	
Zip Code 60201	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Margaret Sondler		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 2147 W. Farwell		Amount of Each Disbursement this Period 6.25 Transaction ID : SB20A.13136
City Chicago	State IL	
Zip Code 60645	Purpose of Disbursement Contribution Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	81.25
TOTAL This Period (last page this line number only).....	81.25

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 148 OF 150	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CRLN/Resurrection Lutheran		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 3303 N. Seminary Avenue		Amount of Each Disbursement this Period 150.00 Transaction ID : SB21.13118
City Chicago	State IL Zip Code 60657	
Purpose of Disbursement Donation	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 430 SOUTH CAPITOL STREET, SE 2ND FLOOR		Amount of Each Disbursement this Period 13600.00 Transaction ID : SB21.13120
City WASHINGTON	State DC Zip Code 20003	
Purpose of Disbursement Unlimited Transfer	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 430 SOUTH CAPITOL STREET, SE 2ND FLOOR		Amount of Each Disbursement this Period 13600.00 Transaction ID : SB21.13122
City WASHINGTON	State DC Zip Code 20003	
Purpose of Disbursement Unlimited Transfer	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	27350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 150	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 430 SOUTH CAPITOL STREET, SE 2ND FLOOR		Amount of Each Disbursement this Period 12600.00 Transaction ID : SB21.13123
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Unlimited Transfer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 430 SOUTH CAPITOL STREET, SE 2ND FLOOR		Amount of Each Disbursement this Period 12600.00 Transaction ID : SB21.13121
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement Unlimited Transfer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Democratic Party of Illinois		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address P.O. Box 518		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB21.13124
City Springfield State IL Zip Code 62705	Purpose of Disbursement Unlimited Transfer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	30200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 150 OF 150	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SCHAKOWSKY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gun Violence Prevention PAC		Date of Disbursement
Mailing Address 1954 First Street #203		M M / D D / Y Y Y Y 09 / 02 / 2014
City Highland Park	State IL	Zip Code 60035
Purpose of Disbursement Contribution	Candidate Name	Amount of Each Disbursement this Period 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/ Type	Transaction ID : SB21.13128

Full Name (Last, First, Middle Initial) B. U.S. Holocaust Memorial Museum		Date of Disbursement
Mailing Address P.O. Box 1852		M M / D D / Y Y Y Y 08 / 05 / 2014
City Highland Park	State IL	Zip Code 60035
Purpose of Disbursement Contribution	Candidate Name	Amount of Each Disbursement this Period 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/ Type	Transaction ID : SB21.13131

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	58050.00