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Image# 12952431370

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An A	uthoriz	ed Com	mittee			Office Us	se Only	
1. NAME OF COMMITTEE (in		TYPE OR PRINT	•		ample: If typin er the lines.	g, type	12FE4M5	5		
CITIZENS FO	R PALON	ΛО								I
		- DO DOY 0074								
ADDRESS (number ar	nd street)	PO BOX 3274								
Check if dif	iferent									
than previous reported. (A	usly	BARRINGTON	 				LLL L	60011		
2. FEC IDENTIFIC	CATION NU	MBER ▼		CITY			STATE A		ZIP CODE	
C C0049845		-	3. IS	TLIC	NEW		AMENE	DED	STATE ▼ DI	STRICT
C C0049845)1			EPORT	× NEW	OR	(A)		IL L	80
4. TYPE OF RE	•	ose One)	(b) 12	-Day PRE	-Election Repo	rt for the:				
(a) Quarterly R	eports:				Primary (12P)	,	General (*	12G)	Runoff	(12R)
April 15	Quarterly R	eport (Q1)		П	Convention (12C)	Special (1	2S)		
X July 15	Quarterly Re	eport (Q2)			·			,	1	
Octobe	r 15 Quarterl	y Report (Q3)	El	ection on	M - M /	D " D /	Y - Y - Y - Y		in the State of	
January	/ 31 Year-End	d Report (YE)	(c) 30	-Day POS	T -Election Rep	ort for the	<u> </u>			
					General (30G)	Runoff (30	OR)	Specia	I (30S)
Termina	ation Report (TER)					Y " Y " Y " Y		in the	
	,	,	El	ection on	M - M /	D " D /	Y Y Y Y		in the State of	
		l								
	M	M / D D /	YY	YYY		M	/ D D /	YY	YY	
5. Covering Period		01	201		through	06	30	20	12	
I certify that I have e	examined this	s Report and to	the best	of my kn	owledge and l	belief it is	true, correct and	d comple	ete.	
Type or Print Name	of Treasurer	Gail Muehrcke)							
							M M	/ D	D / Y Y	
Signature of Treasure	er <u>Gail</u> l	Muehrcke			[Electronically 1	Filed]	Date 07	1:	3 20	12
NOTE: Submission of	false, errone	ous, or incomple	te informa	ation may	subject the per	son signing	this Report to t	he penalt	ties of 2 U.S.C.	§437g.
Office Use								FFC	C FORM 3	
Only									vised 02/2003)	

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
CITIZENS FOR PALOMO

Report Covering the Period:	From:	04 /	D D /	Y Y Y Y Y 2012	To:	06 /	30 /	Y Y Y Y Y 2012

		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))	0.00	15147.70
	(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	15147.70
	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	4000.00	12663.43
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	4000.00	12663.43
	Cash on Hand at Close of Reporting Period (from Line 27)	-1632.53	
	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	19600.00	

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

PAGE 3 / 14

17147.70

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

CITIZENS FOR PALOMO

06 2012 04 01 2012 30 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 12502.00 (i) Itemized (use Schedule A)..... 0.00 1300.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 13802.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 1345.70 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 0.00 15147.70 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 4100.00 2000.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 4100.00 2000.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines

4100.00

11(e), 12, 13(c), 14, and 15)

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

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 14

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	4000.00	12663.43
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed	0.00	0.00
	by the Candidate(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	200	
	Than Political Committees	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	4000.00	12663.43
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	-1732.53
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	4100.00
25.	SUBTOTAL (add Line 23 and Line 24)		2367.47
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	4000.00
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		-1632.53

Receipt For:

Primary

Other (specify)

General

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

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

lm	age# 12952431374			
	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 OF 14 (check only one) 11a
	ny information copied from such Reports and Stator commercial purposes, other than using the			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO			
۸.	Full Name (Last, First, Middle Initial) ANDREW G. PALOMO			Date of Receipt
٦.	Mailing Address PO BOX 3274			05 07 2012
	City BARRINGTON	State IL	Zip Code 60011	Transaction ID : SA13A.4406
	FEC ID number of contributing federal political committee.	C H2I	L08104	Amount of Each Receipt this Period 2100.00
	. ,	Occupation Mortgage P	lanner, Financial Planner	loan
	Receipt For: 2012 Primary General Other (specify)	Election Cy	vcle-to-Date 15600.00	
3.	Full Name (Last, First, Middle Initial) ANDREW G. PALOMO			Date of Receipt
٠.	Mailing Address PO BOX 3274			06 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City BARRINGTON	State IL	Zip Code 60011	Transaction ID : SA13A.4407
	FEC ID number of contributing federal political committee.	C H2I	L08104	Amount of Each Receipt this Period
	Name of Employer	Occupation		2000.00
	Pillar Financial	Mortgage P	anner, Financial Planner	loan
	Receipt For: 2012 Primary General Other (specify)	Election Cy	rcle-to-Date 17600.00	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
j.	Mailing Address City	State	Zip Code	M M / D D / Y Y Y Y
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		┥l <i>.</i>

Election Cycle-to-Date

4100.00

4100.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUMBER: (check only one)			PAGE	6	OF	14
Use separate schedule(s)							
for each category of the Detailed Summary Page	X 17		18		19a		191
Detailed Guillinary 1 age	20a		20b		20c		21

		20a 20b 20c 21
Any information copied from such Reports and Statements may not be sold or or for commercial purposes, other than using the name and address of any poli		
NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO		
Full Name (Last, First, Middle Initial) A. Richard Cape Mailing Address 605 Clover Lane		Date of Disbursement Date of Disbursement 05 07 2012
City State Zip Code		
Round Lake Beach IL 60073 Purpose of Disbursement Salary	001	Amount of Each Disbursement this Period 2000.00
Candidate Name CITIZENS FOR PALOMO	Category/ Type	Transaction ID : SB17.4409
Office Sought: House Disbursement For: 2012 Primary General		
Full Name (Last, First, Middle Initial) Richard Cape		Date of Disbursement
Mailing Address 605 Clover Lane		06 04 2012
CityStateZip CodeRound Lake BeachIL60073		Amount of Each Disbursement this Period
Purpose of Disbursement salary	001	2000.00 Transaction ID : SB17.4410
Candidate Name CITIZENS FOR PALOMO	Category/ Type	
Office Sought: Senate President State: IL District: 08 Disbursement For: 2012 Primary General Other (specify)		
Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		M M / D D / Y Y Y
City State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Category/ Type	
Office Sought: House Senate President State: Disbursement For: Primary Other (specify) Other (specify)		
SUBTOTAL of Disbursements This Page (optional)		4000.00
TOTAL This Period (last page this line number only)		4000.00

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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OF

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

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

FOR LINE NUMBER: (check only one)

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OF

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

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

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OF

Detailed Summary Page 13b Transaction ID: SC/10.4344 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary ANDREW G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 City State ZIP Code IL 60011 BARRINGTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D31 ^M 10^M 2011 0.00 7/18/2013 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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Detailed Summary Page Transaction ID: SC/10.4348 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary ANDREW G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 City State ZIP Code IL 60011 BARRINGTON Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} ^D25 2011 0.00 7/18/2013 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

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

Use separate schedule(s) for each category of the

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) Detailed Summary Page Transaction ID: SC/10.4407 NAME OF COMMITTEE (In Full) CITIZENS FOR PALOMO LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary ANDREW G. PALOMO General Mailing Address Other (specify) \blacktriangledown PO BOX 3274 State ZIP Code City IL 60011 BARRINGTON Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M06^M Ž012 0.00 6/1/13 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) 19600.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.