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FEC FORM 3X

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	ME OF MMITTEE (in full)	TYPE OR PRINT ▼		mple: If typing the lines.	, type	L2FE4M5		
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2. FE	C IDENTIFICATION	NUMBER ▼	CITY 🛦	~.	S	TATE A	ZIP CC	DDE 🛦
C	00,2,93	1.18	3. IS THIS. REPORT	X (N	EW I) OR	AM (A)	ENDED	
(Ch (a)	PE OF REPORT oose One) Quarterly Reports: April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report July 31 Mid-Yea Report (Non-ele Year Only) (MY) Termination Rep (TER)	t (Q2) PRE-Elect Report for t (YE) r ction (C) 12-Day PRE-Elect Report for 30-Day POST-Ele Report for	Apr 20 (M4)	J.	2C)	Sep	in the	Special (30S)
	vering Period	this Report and to the	0/5	through		1371	20/5	(AAAIMSKKI
	Print Name of Treas		WAL	SH		, conect and	. complete.	
Signatu	re of Treasurer _	Johns	Nols		Da	ate /	5	2016
NOTE:	Submission of false, er	roneous, or incomplete inf	ormation may si	ubject the pers	on signing thi	s Report to th	ne penalties of 2	U.S.C. §437g.
 	Office Use Only						FEC FOR Rev. 12/2	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name CITIZENS FOR LIFE LINOIS From: Report Covering the Period: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period. 48000 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 25600 26200 7. Total Disbursements (from Line 31)........ Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW

Washington, DC 20463

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

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DETAILED SUMMARY PAGE

of Receipts FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name CITIZENS /LLINOIS Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... (ii) Uniternized (iii) TOTAL (add Lines 11(a)(i) and (ii).....▶ (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).......▶ 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period	COLUMN B
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tris Period	Calendar Year-to-Date
	(i) Federal Share	6.00	1.1.200
	(ii) Non-Federal Share		
	(b) Other Federal Operating		
	Expenditures		
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶	600	11200
22.	Transfers to Affiliated/Other Party		
	Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees	25000	25.000
24.	Independent Expenditures		
25.	(use Schedule E)		
26.	Loan Repayments Made		
	Loans Made		
	(b) Political Party Committees		in the state of th
	(c) Other Political Committees		
	(such as PACs)		
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶		
	(222 2 20(2), (2)) 2 (2),		manufactured the state of the s
29.	Other Disbursements		
30.	Federal Election Activity (2 U.S.C. §431(20))		41
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	Language Control of the Control of t	hander the state of the state o
	(i) Federal Share	le de la constant de	
	(ii) "Levin" Share		
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds		
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	256,00	36500
32.	Total Federal Disbursements		•
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	25600	3,62.00

(subtract Line 37 from Line 36)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 **COLUMN A** III. Net Contributions/Operating Ex-**COLUMN B** penditures **Total This Period** Calendar Year-to-Date 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures . (add Line 21(a)(i) and Line 21(b)) 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

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SCHEDULE B (FEC Form 3X)

CONEDULE D (120 1011110A)	NUMBER:		PAC	<u> </u>	<u> </u>				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	√ 123	24	25	☐ 26		
•	Detailed Summary Page	27	28a	128b	28c	29	30b		
Any information copied from such Reports and Stater	neme may not be cold or used		1 1						
or for commercial purposes, other than using the name	ne and address of any political	committee to	solicit co	ntributions	from suci	n commi	itee.		
NAME OF COMMITTEE (In Full)									
/ LLINOIS CITIZE	INS FOR LI	FE							
Full Name (Last, First, Middle Initial)									
KYLE MCCARTER FOR GAGEST			Date of Disbursement						
Mailing Address 40 COMMERCE City LEBANNON	LANE		12		1 6	X 0 /	<u>ک</u>		
CHY LEBANNON	State Zip Code 14 6225	-46				•	•		
Purpose of Disbursement									
Candidate Name		Category/ Type	Amoun	t of Each	Disburser	nent this 50	O C		
Office Sought: House Disburse	ment For:			· · · · · · · · · · · · · · · · · · ·		·			
Senate	Primary General								
President	Other (specify)	•							
State: District:		·····							
Full Name (Last, First, Middle Initial)			Data a	f Dishum		•			
B .			Date of Disbursement						
Mailing Address				/ 6 6 / 7 7 7 7 7					
City	State Zip Code								
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ruipose of Disbuisement	Purpose of Disbursement			Amount of Each Disbursement this Period					
Candidate Name				- V		- T	 		
		Category/ Type				. B			
Office Sought: House Disburse	ment For:								
Senate	Primary General								
President	Other (specify) ▼								
State: District:									
Full Name (Last, First, Middle Initial) C.			D-4-	of Disburso	·				
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Mailing Address			[***	' ' ' ' ' '	'		**		
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City	State Zip Code								
Purpose of Disbursement			ł						
Candidate Name Category/				n of East	Dich	mort #L!-	Dodod		
			Amount of Each Disbursement this Period						
•		Type				- -			
	ment For:		1						
Senate	Primary General]	•					
President	Other (specify)								
State: District:	· · · · · · · · · · · · · · · · · · ·		<u> </u>	<u> </u>					
SUBTOTAL of Disbursements This Page (optional).	***************************************)							
TOWAL This Bud I d				-	,	つだの	00		
TOTAL This Period (last page this line number only	/)	>	<u> </u>			UCX	vv		

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ELE CTION

VASHINGTON D.C.

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail Postmarked	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busine	ess Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
PREPARER (3/2015)	1 11/6 DATE PREPARED