

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 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 JUDY DIEKELMAN

Signature of Treasurer JUDY DIEKELMAN [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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ILLINOIS REPUBLICAN PARTY

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="71003.82"/>	<input type="text" value="71003.82"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="87883.68"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="31801.03"/>	<input type="text" value="238845.57"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="119684.71"/>	<input type="text" value="309849.39"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="61794.41"/>	<input type="text" value="251959.09"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="57890.30"/>	<input type="text" value="57890.30"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="221893.43"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ILLINOIS REPUBLICAN PARTY

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5627.28	124432.28
(ii) Unitemized	10135.21	35348.21
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	15762.49	159780.49
(b) Political Party Committees	0.00	1500.00
(c) Other Political Committees (such as PACs).....	600.00	7400.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	16362.49	168680.49
12. Transfers From Affiliated/Other Party Committees.....	9950.00	37750.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	5488.54	32415.08
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	5488.54	32415.08
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	31801.03	238845.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	26312.49	206430.49

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	14572.82	42446.31
(ii) Non-Federal Share.....	15391.71	50073.85
(b) Other Federal Operating Expenditures	12936.69	29342.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	42901.22	121862.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	32983.79
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	18893.19	97112.93
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	18893.19	97112.93
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	61794.41	251959.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46402.70	201885.24

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16362.49	168680.49
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16362.49	168680.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	27509.51	71788.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27509.51	71788.52

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

THIS REPORT IS BEING AMENDED TO REFLECT THE DISBURSEMENT ON 5/30/14 - PETER COLLINS - \$1,147.34 - PAYROLL. THE CLOSING CASH ON HAND HAS BEEN ADJUSTED ACCORDINGLY.

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. JOSEPH B ALTONJI

Mailing Address 1587 INDEPENDENCE AVE.

City State Zip Code
GLENVIEW IL 60025

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

Name of Employer Occupation
LAWSON STRATEGY LLC CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2014
Transaction ID : SA11AI.5801

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. JAY BERGMAN

Mailing Address 222 WESTRIDGE ROAD

City State Zip Code
JOLIET IL 60431

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

Name of Employer Occupation
PETCO PETROLEUM CORPORATION CORPORATE EXECUTIVE OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014
Transaction ID : SA11AI.6291

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. MICHAEL S BIGGER

Mailing Address PO BOX 80

City State Zip Code
WYOMING IL 61491-0080

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

Name of Employer Occupation
STATE FARM INSURANCE INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2014
Transaction ID : SA11AI.5827

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. MICHAEL S BIGGER

Mailing Address **PO BOX 80**

City **WYOMING** State **IL** Zip Code **61491-0080**

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

Name of Employer **STATE FARM INSURANCE** Occupation **INSURANCE AGENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
05 / 20 / 2014
Transaction ID : SA11AI.5828

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. ERIN BRODERICK

Mailing Address **130 N GARLAND COURT #1606**

City **CHICAGO** State **IL** Zip Code **60602**

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

Name of Employer **BAKER & MCKENZIE LLP** Occupation **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
05 / 20 / 2014
Transaction ID : SA11AI.5845

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. JOVITA CARRANZA

Mailing Address **9715 WOODS DRIVE UNIT 2002**

City **SKOKIE** State **IL** Zip Code **60077-4449**

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

Name of Employer **ICR GROUP** Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1527.28**

Date of Receipt
05 / 05 / 2014
Transaction ID : SA11AI.5720

Amount of Each Receipt this Period
927.28
In-kind - CATERING SERVICES

SUBTOTAL of Receipts This Page (optional)..... ► **1127.28**

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

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

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

FOR LINE NUMBER: PAGE 9 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. GRANT CULP

Mailing Address 7535 W. JACKSON #C2

City FOREST PARK State IL Zip Code 60130

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

Name of Employer CULLOTON STRATEGIES Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

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

Transaction ID : SA11AI.5893

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. CAROL DONOVAN

Mailing Address 340 E RANDOLPH STREET APT. 2803

City CHICAGO State IL Zip Code 60601-7930

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

Name of Employer SMITH & DONOVAN CONFECTIONS INC. Occupation BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

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

Transaction ID : SA11AI.5912

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. MARYALICE ERICKSON

Mailing Address 6707 N GREENMONT ROAD

City PEORIA State IL Zip Code 61614-2411

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

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

Transaction ID : SA11AI.5922

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **600.00**

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

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

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

FOR LINE NUMBER: PAGE 10 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. ALAN GEORGE

Mailing Address 98 LOCUST RIDGE COURT

City MORTON State IL Zip Code 61550-1118

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014
Transaction ID : SA11AI.5940

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. DOUGLAS GESSNER

Mailing Address 1111 WAGNER ROAD

City GLENVIEW State IL Zip Code 60025

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

Name of Employer KIRKLAND & ELLIS LLP Occupation LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2014
Transaction ID : SA11AI.5941

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. THOMAS HAYWARD

Mailing Address 3 FIRST NATIONAL PLAZA
SUITE 3300

City CHICAGO State IL Zip Code 60602-5030

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

Name of Employer BELL, BOYD & LLOYD Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014
Transaction ID : SA11AI.5972

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. JOHN LAPPE

Mailing Address 551 JEFFERSON ST

City State Zip Code
HINSDALE IL 60521

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

Name of Employer Occupation
RT NELSON & ASSOC. INSURANCE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
05 / 21 / 2014
Transaction ID : SA11AI.6273

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. HAROLD LAUGHLIN

Mailing Address 1325 JEFFERSON AVENUE

City State Zip Code
DOWNERS GROVE IL 60516-1214

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
05 / 08 / 2014
Transaction ID : SA11AI.6023

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. DOUGLAS J MACLEOD

Mailing Address 1709 N NORTH PARK AVENUE

City State Zip Code
CHICAGO IL 60614-6374

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
05 / 20 / 2014
Transaction ID : SA11AI.6040

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... **550.00**

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

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

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

FOR LINE NUMBER: PAGE 12 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. LEO MELAMED

Mailing Address 30 SOUTH WACKER DRIVE

City State Zip Code
CHICAGO IL 60606

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

Name of Employer Occupation
MELAMED & ASSOCIATES CHAIRMAN & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2014
Transaction ID : SA11AI.6060

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. PETER ORUM

Mailing Address PO BOX 748

City State Zip Code
ST CHARLES IL 60174-0748

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

Name of Employer Occupation
MIDWEST GROUNDCOVERS LLC NURSERY FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014
Transaction ID : SA11AI.6091

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. JOHN RAU

Mailing Address 209 E LAKE SHORE DRIVE, UNIT 8W

City State Zip Code
CHICAGO IL 60611

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

Name of Employer Occupation
MIAMI CORPORATION PRESIDENT & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2014
Transaction ID : SA11AI.6116

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. EDWARD SWAN

Mailing Address 726 GREENWOOD AVENUE

City State Zip Code
WILMETTE IL 60091-1748

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

Name of Employer Occupation
KIRKLAND & ELLIS ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014
Transaction ID : SA11AI.6188

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. LORETTA WIDIGER

Mailing Address 3 OAK BROOK CLUB DRIVE
APT. E306

City State Zip Code
OAK BROOK IL 60523-8561

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014
Transaction ID : SA11AI.6217

Amount of Each Receipt this Period
300.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	5627.28

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

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

FOR LINE NUMBER: PAGE 14 OF 44
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	-----------------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. VOLUNTEERS FOR SHIMKUS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 661
City COLLINSVILLE State IL Zip Code 62234
FEC ID number of contributing federal political committee. **C** C00258855
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 01 / 2014
Transaction ID : SA11C.5724
Amount of Each Receipt this Period
600.00
In-kind - RENT

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) ▼
Aggregate Year-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) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	600.00

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

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

FOR LINE NUMBER: PAGE 15 OF 44
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	----------------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
37750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : SA12.5775

Amount of Each Receipt this Period
9950.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	9950.00
TOTAL This Period (last page this line number only).....▶	9950.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. AIRNET GROUP, INC.

Mailing Address 801 BROAD STREET

City CHATTANOOGA State TN Zip Code 37402

Purpose of Disbursement
VOLUNTEER PHONE MINUTES - DEBT PAYMENT

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Transaction ID : SB21B.5776

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JOVITA CARRANZA

Mailing Address 9715 WOODS DRIVE
UNIT 2002

City SKOKIE State IL Zip Code 60077-4449

Purpose of Disbursement
In-kind - CATERING SERVICES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Transaction ID : SB21B.5721

Amount of Each Disbursement this Period

927.28

Full Name (Last, First, Middle Initial)

C. COLE TAYLOR BANK

Mailing Address P.O. BOX 804427

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2014

Transaction ID : SB21B.5738

Amount of Each Disbursement this Period

229.08

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

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

2156.36

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. EVENTBRITE

Mailing Address 651 BRENNAN STREET

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 05 / 2014

Transaction ID : **SB21B.5766**

Amount of Each Disbursement this Period: 69.92

Category/Type

Full Name (Last, First, Middle Initial)

B. EVENTBRITE

Mailing Address 651 BRENNAN STREET

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 14 / 2014

Transaction ID : **SB21B.5767**

Amount of Each Disbursement this Period: 18.70

Category/Type

Full Name (Last, First, Middle Initial)

C. MK 55 WEST INVESTOR, LLC

Mailing Address 55 W. MONROE STREET

City CHICAGO State IL Zip Code 60603

Purpose of Disbursement
RENT - DEBT PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 23 / 2014

Transaction ID : **SB21B.5764**

Amount of Each Disbursement this Period: 9326.04

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9414.66

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 144 2ND STREET
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5768

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 144 2ND STREET
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5769

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 144 2ND STREET
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5770

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 111 N. WABASH AVENUE

City State Zip Code
CHICAGO IL 60602

Purpose of Disbursement
OFFICE SUPPLIES - DEBT PAYMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 23 / 2014

Transaction ID : SB21B.5746

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. VOLUNTEERS FOR SHIMKUS

Mailing Address PO BOX 661

City State Zip Code
COLLINSVILLE IL 62234

Purpose of Disbursement
In-kind - RENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SB21B.5725

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

1100.00

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

12885.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. ADVANTAGE PAYROLL SERVICES

Mailing Address PO BOX 1330

City AUBURN State ME Zip Code 04211

Purpose of Disbursement
PAYROLL FEES AND TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5734

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ADVANTAGE PAYROLL SERVICES

Mailing Address PO BOX 1330

City AUBURN State ME Zip Code 04211

Purpose of Disbursement
PAYROLL FEES AND TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5735

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ANDREW COLLINS

Mailing Address 308 S MAIN ST, #10

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5730

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. ANDREW COLLINS

Mailing Address 308 S MAIN ST, #10

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5731

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. PETER COLLINS

Mailing Address 3200 BARBARA DRIVE

City GLENVIEW State IL Zip Code 60026

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.6508

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. JAYME ODOM

Mailing Address 1401 S STATE ST APT 2111

City CHICAGO State IL Zip Code 60605

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5726

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. JAYME ODOM

Mailing Address 1401 S STATE ST APT 2111

City CHICAGO State IL Zip Code 60605

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5727

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ANDREW WELHOUSE

Mailing Address 303 S. HALSTED STREET
APT. 2

City CHICAGO State IL Zip Code 60661

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5728

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ANDREW WELHOUSE

Mailing Address 303 S. HALSTED STREET
APT. 2

City CHICAGO State IL Zip Code 60661

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.5729

Amount of Each Disbursement this Period

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 44
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AIRNET GROUP, INC.	Nature of Debt (Purpose): VOLUNTEER PHONE MINUTES
Mailing Address 801 BROAD STREET	
City State Zip Code CHATTANOOGA TN 37402	

Outstanding Balance Beginning This Period 49681.51	Transaction ID : SD10.4202	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 48681.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECT MAIL SYSTEMS	Nature of Debt (Purpose): DIRECT MAIL: PRINTING AND POSTAGE
Mailing Address 12450 AUTOMOBILE BLVD.	
City State Zip Code CLEARWATER FL 33762	

Outstanding Balance Beginning This Period 7420.15	Transaction ID : SD10.4199	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7420.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS CONNECT, LLC	Nature of Debt (Purpose): TELEMARKETING
Mailing Address 7300 HUDSON BLVD., N	
City State Zip Code SAINT PAUL MN 55128	

Outstanding Balance Beginning This Period 43348.00	Transaction ID : SD10.4210	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 43348.00

1) SUBTOTALS This Period This Page (optional)..... ▶	99449.66
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 44
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MAILFINANCE, NEOPOST USA	Nature of Debt (Purpose): POSTAGE SYSTEM
Mailing Address 1335 VALWOOD PARKWAY, STE. 111	
City State Zip Code CARROLLTON TX 75006	

Outstanding Balance Beginning This Period <input type="text" value="5388.24"/>	Transaction ID : SD10.4223	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5388.24"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MK 55 WEST INVESTOR, LLC	Nature of Debt (Purpose): OFFICE RENT
Mailing Address 55 W. MONROE STREET	
City State Zip Code CHICAGO IL 60603	

Outstanding Balance Beginning This Period <input type="text" value="31083.36"/>	Transaction ID : SD10.4219	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="9326.04"/>	Outstanding Balance at Close of This Period <input type="text" value="21757.32"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor REVOLVIS CONSULTING, INC.	Nature of Debt (Purpose): DIRECT MAIL: PRINTING AND POSTAGE
Mailing Address 400 FIRST STREET, SE SUITE 200	
City State Zip Code WASHINGTON DC 20003	

Outstanding Balance Beginning This Period <input type="text" value="44951.95"/>	Transaction ID : SD10.4213	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="44951.95"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="72097.51"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 25 OF 44
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor STAPLES	Nature of Debt (Purpose): OFFICE SUPPLIES
Mailing Address 111 N. WABASH AVENUE	
City State Zip Code CHICAGO IL 60602	

Outstanding Balance Beginning This Period 4246.26	Transaction ID : SD10.4208	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 3746.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor STONERIDGE GROUP	Nature of Debt (Purpose): WEB HOSTING
Mailing Address 4400 N. POINT PKWY, #190	
City State Zip Code ALPHARETTA GA 30022	

Outstanding Balance Beginning This Period 5700.00	Transaction ID : SD10.4221	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor TARGETED CREATIVE COMMUNICATIONS, INC.	Nature of Debt (Purpose): DIRECT MAIL: PRINTING AND POSTAGE
Mailing Address 106 S. COLUMBUS ST	
City State Zip Code ALEXANDRIA VA 22314	

Outstanding Balance Beginning This Period 41600.00	Transaction ID : SD10.4204	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 41600.00

1) SUBTOTALS This Period This Page (optional)..... ▶	50346.26
2) TOTALS This Period (last page this line number only)..... ▶	221893.43
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	221893.43

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.4221

(Current debt amount of 700.00 from a balance of 5700.00 has been disputed and is no longer owed to the Stoneridge Group).

Form/Schedule:

Transaction ID:

SCHEDULE H2 (FEC Form 3X)**ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<p>ACTIVITY OR EVENT IDENTIFIER 2.25.14 Fundraising Event (02/25/2014)</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported Transaction ID : H2.5792</p>	<p>FEDERAL % <input type="text" value="64.00"/> %</p>	<p>NONFEDERAL % <input type="text" value="36.00"/> %</p>
<p>ACTIVITY OR EVENT IDENTIFIER 3.19.14 Fundraising Event (03/19/2014)</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported Transaction ID : H2.5793</p>	<p>FEDERAL % <input type="text" value="75.00"/> %</p>	<p>NONFEDERAL % <input type="text" value="25.00"/> %</p>
<p>ACTIVITY OR EVENT IDENTIFIER 5.05.14 Fundraising Event (05/05/2014)</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported Transaction ID : H2.5741</p>	<p>FEDERAL % <input type="text" value="95.00"/> %</p>	<p>NONFEDERAL % <input type="text" value="5.00"/> %</p>
<p>ACTIVITY OR EVENT IDENTIFIER 5.05.14 Fundraising Event_2 (05/05/2014)</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported Transaction ID : H2.6305</p>	<p>FEDERAL % <input type="text" value="72.23"/> %</p>	<p>NONFEDERAL % <input type="text" value="27.77"/> %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL % <input type="text"/> %</p>	<p>NONFEDERAL % <input type="text"/> %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL % <input type="text"/> %</p>	<p>NONFEDERAL % <input type="text"/> %</p>

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

NAME OF ACCOUNT ILLINOIS REPUBLICAN PARTY	DATE OF RECEIPT MM / DD / YYYY 05 / 23 / 2014	TOTAL AMOUNT TRANSFERRED 5488.54
----------------------------------------------	-----------------------------------------------------	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	4887.94
Transaction ID : H3.6234	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) 2.25.14 Fundraising Event (02/25/2014)	300.60
Transaction ID : H3.6234.0	
b) 3.19.14 Fundraising Event (03/19/2014)	300.00
Transaction ID : H3.6234.1	
c) Total Amount Transferred For Direct Fundraising	600.60
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	4887.94
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	600.60
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	5488.54

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.5739 NEW RIVER RESEARCH INSTITUTE		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2150 COUNTRY CLUB ROAD SUITE 221		Allocated Activity or Event Year-To-Date 3000.00	
City WINSTON-SALEM State NC Zip Code 27104	Category/ Type	Date 05 / 23 / 2014	
Purpose of Disbursement: SOFTWARE		Allocated Activity or Event Year-To-Date 3000.00	
Activity or Event Identifier: Voter Drive()		Date 05 / 23 / 2014	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		630.00 + 2370.00 = 3000.00	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.5786 ARMBRUSTER MANUFACTURING COMPANY		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8600 PALM ROAD		Allocated Activity or Event Year-To-Date 4470.00	
City SPRINGFIELD State IL Zip Code 62712	Category/ Type	Date 05 / 29 / 2014	
Purpose of Disbursement: EVENT STAGING EXPENSE		Allocated Activity or Event Year-To-Date 4470.00	
Activity or Event Identifier: Voter Drive()		Date 05 / 29 / 2014	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		308.70 + 1161.30 = 1470.00	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.5752 OFFICE DEPOT		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6647 EDWARDSVILLE CROSSING DRIVE		Allocated Activity or Event Year-To-Date 16381.55	
City EDWARDSVILLE State IL Zip Code 62025	Category/ Type	Date 02 / 20 / 2014	
Purpose of Disbursement: OFFICE SUPPLIES [H4.5751]		Allocated Activity or Event Year-To-Date 16381.55	
Activity or Event Identifier: Administrative [MEMO ITEM]		Date 02 / 20 / 2014	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		14.95 + 56.22 = 71.17	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
938.70		3531.30		4470.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

Form A: Full Name (Last, First, Middle Initial) ANDREW COLLINS, Transaction ID : H4.5754, Allocated Activity or Event: Administrative, Date: 02/25/2014, Total Amount: 159.60

Form B: Full Name (Last, First, Middle Initial) PARK ONE, INC., Transaction ID : H4.6295, Allocated Activity or Event: Administrative, Date: 03/18/2014, Total Amount: 16.00

Form C: Full Name (Last, First, Middle Initial) HILTON HOTEL - CHICAGO, Transaction ID : H4.6297, Allocated Activity or Event: Administrative, Date: 03/20/2014, Total Amount: 264.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) JIMMY JOHN'S		Transaction ID : H4.5757	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1063 SOUTH STATE ROUTE 157			Allocated Activity or Event Year-To-Date 21250.37	
City EDWARDSVILLE	State IL	Zip Code 62025	Date 03 / 29 / 2014	
Purpose of Disbursement: MEETING EXPENSE: MEALS [H4.5751]		002		
Activity or Event Identifier: Administrative		Category/ Type		
[MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	
22.44			84.41	
		=	TOTAL AMOUNT	
			106.85	

B. Full Name (Last, First, Middle Initial) TARGET		Transaction ID : H4.5761	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2350 TROY RD.			Allocated Activity or Event Year-To-Date 21250.37	
City EDWARDSVILLE	State IL	Zip Code 62025	Date 03 / 29 / 2014	
Purpose of Disbursement: MEETING EXPENSE: MEALS [H4.5751]		002		
Activity or Event Identifier: Administrative		Category/ Type		
[MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	
4.21			15.84	
		=	TOTAL AMOUNT	
			20.05	

C. Full Name (Last, First, Middle Initial) ANDREW COLLINS		Transaction ID : H4.5758	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 308 S MAIN ST, #10			Allocated Activity or Event Year-To-Date 21250.37	
City EDWARDSVILLE	State IL	Zip Code 62025	Date 04 / 10 / 2014	
Purpose of Disbursement: MILEAGE REIMBURSEMENT [H4.5751]		002		
Activity or Event Identifier: Administrative		Category/ Type		
[MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	
21.52			80.96	
		=	TOTAL AMOUNT	
			102.48	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) PAPPADEAUX		Transaction ID : H4.6299		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 921 PASQUINELLI DR.				Allocated Activity or Event Year-To-Date 21802.43		
City WESTMONT	State IL	Zip Code 60559		Date <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: MEETING EXPENSE: MEALS [H4.6278]		<input type="text" value="001"/>				
Activity or Event Identifier: Administrative		Category/ Type				
[MEMO ITEM]						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="6.73"/>			<input type="text" value="25.32"/>			<input type="text" value="32.05"/>

B. Full Name (Last, First, Middle Initial) BOSTON MARKET		Transaction ID : H4.6301		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 625 S. COUNTY FARM RD.				Allocated Activity or Event Year-To-Date 21819.89		
City WHEATON	State IL	Zip Code 60187		Date <input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: TRAVEL: MEALS [H4.6278]		<input type="text" value="002"/>				
Activity or Event Identifier: Administrative		Category/ Type				
[MEMO ITEM]						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="1.82"/>			<input type="text" value="6.83"/>			<input type="text" value="8.65"/>

C. Full Name (Last, First, Middle Initial) ANDREW COLLINS		Transaction ID : H4.5762		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 308 S MAIN ST, #10				Allocated Activity or Event Year-To-Date 27245.47		
City EDWARDSVILLE	State IL	Zip Code 62025		Date <input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
Purpose of Disbursement: MILEAGE REIMBURSEMENT [H4.5751]		<input type="text" value="002"/>				
Activity or Event Identifier: Administrative		Category/ Type				
[MEMO ITEM]						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="38.57"/>			<input type="text" value="145.11"/>			<input type="text" value="183.68"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) ANDREW COLLINS		Transaction ID : H4.5763		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 308 S MAIN ST, #10				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City EDWARDSVILLE State IL Zip Code 62025				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: MILEAGE REIMBURSEMENT [H4.5751]		002		Allocated Activity or Event Year-To-Date 27265.05	
Activity or Event Identifier: Administrative		Category/Type		Date 04 / 29 / 2014	
[MEMO ITEM]					
FEDERAL SHARE		+		NONFEDERAL SHARE	
21.52				80.96	
		=		TOTAL AMOUNT	
				102.48	

B. Full Name (Last, First, Middle Initial) ANDREW COLLINS		Transaction ID : H4.5747		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 308 S MAIN ST, #10				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City EDWARDSVILLE State IL Zip Code 62025				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: TRAVEL REIMBURSEMENT: SEE MEMO		002		Allocated Activity or Event Year-To-Date 27597.68	
Activity or Event Identifier: Administrative		Category/Type		Date 05 / 05 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
35.40				133.16	
		=		TOTAL AMOUNT	
				168.56	

C. Full Name (Last, First, Middle Initial) ANDREW COLLINS		Transaction ID : H4.5748		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 308 S MAIN ST, #10				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City EDWARDSVILLE State IL Zip Code 62025				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: MEMO: MILEAGE REIMBURSEMENT [H4.5747]		002		Allocated Activity or Event Year-To-Date 27597.68	
Activity or Event Identifier: Administrative		Category/Type		Date 05 / 05 / 2014	
[MEMO ITEM]					
FEDERAL SHARE		+		NONFEDERAL SHARE	
35.40				133.16	
		=		TOTAL AMOUNT	
				168.56	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.40		133.16		168.56

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) CITI CARDS		Transaction ID : H4.6278	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 183037			Allocated Activity or Event Year-To-Date 28594.64	
City COLUMBUS	State OH	Zip Code 43218	Date 05 / 05 / 2014	
Purpose of Disbursement: CREDIT CARD PAYMENT: SEE MEMOS		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
67.49			253.88	321.37

B. Full Name (Last, First, Middle Initial) COMED		Transaction ID : H4.5784	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 6111			Allocated Activity or Event Year-To-Date 28668.54	
City CAROL STREAM	State IL	Zip Code 60197	Date 05 / 06 / 2014	
Purpose of Disbursement: UTILITIES		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
15.52			58.38	73.90

C. Full Name (Last, First, Middle Initial) YELLOW CAB OF MEMPHIS		Transaction ID : H4.6248	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 581 S. 2ND STREET			Allocated Activity or Event Year-To-Date 28701.14	
City MEMPHIS	State TN	Zip Code 38126	Date 05 / 08 / 2014	
Purpose of Disbursement: TRAVEL: GROUND		002		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
6.85			25.75	32.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.86		338.01		427.87

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.6250 KING'S PLACE CAFE		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 162 BEALE STREET		Allocated Activity or Event Year-To-Date _____ 28732.70	
City State Zip Code MEMPHIS TN 38103	002 Category/ Type	Date <input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: TRAVEL: FOOD		Allocated Activity or Event Year-To-Date _____ 28732.70	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 6.63 _____ 24.93 _____ 31.56			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.5733 KENNEDY CHIGLO		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 544 WEST SCHUBERT AVE.		Allocated Activity or Event Year-To-Date _____ 28896.77	
City State Zip Code CHICAGO IL 60614	001 Category/ Type	Date <input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: PAYROLL		Allocated Activity or Event Year-To-Date _____ 28896.77	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 34.45 _____ 129.62 _____ 164.07			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.6252 THE PEABODY HOTEL		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 149 UNION AVE.		Allocated Activity or Event Year-To-Date _____ 28900.77	
City State Zip Code MEMPHIS TN 38103	002 Category/ Type	Date <input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: TRAVEL: FOOD		Allocated Activity or Event Year-To-Date _____ 28900.77	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 0.84 _____ 3.16 _____ 4.00			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 41.92		_____ 157.71		_____ 199.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) THE PEABODY HOTEL		Transaction ID : H4.6254	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 149 UNION AVE.			Allocated Activity or Event Year-To-Date 29581.78	
City MEMPHIS	State TN	Zip Code 38103	Date 05 / 14 / 2014	
Purpose of Disbursement: TRAVEL: LODGING		002		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
143.01			538.00	681.01

B. Full Name (Last, First, Middle Initial) REPUBLICAN NATIONAL COMMITTEE		Transaction ID : H4.6255	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 310 1ST STREET SE			Allocated Activity or Event Year-To-Date 29681.78	
City WASHINGTON	State DC	Zip Code 20003-1885	Date 05 / 15 / 2014	
Purpose of Disbursement: EVENT ENTRY FEE		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
21.00			79.00	100.00

C. Full Name (Last, First, Middle Initial) ANDREW COLLINS		Transaction ID : H4.5751	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 308 S MAIN ST, #10			Allocated Activity or Event Year-To-Date 30428.09	
City EDWARDSVILLE	State IL	Zip Code 62025	Date 05 / 16 / 2014	
Purpose of Disbursement: REIMBURSEMENT: SEE MEMOS		002		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
156.73			589.58	746.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
320.74		1206.58		1527.32

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.6263
OFFICE DEPOT
Mailing Address 6 SOUTH STATE STREET
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 31151.20
Date 05 / 19 / 2014
FEDERAL SHARE 60.15 + NONFEDERAL SHARE 226.30 = TOTAL AMOUNT 286.45

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.5737
WEST BEND MUTUAL INSURANCE
Mailing Address 188 W INDUSTRIAL DRIVE SUITE 430
City ELMHURST State IL Zip Code 60126
Purpose of Disbursement: INSURANCE
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 31717.21
Date 05 / 22 / 2014
FEDERAL SHARE 118.86 + NONFEDERAL SHARE 447.15 = TOTAL AMOUNT 566.01

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.5765
MK 55 WEST INVESTOR, LLC
Mailing Address 55 W. MONROE STREET
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: RENT
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 32660.22
Date 05 / 23 / 2014
FEDERAL SHARE 198.03 + NONFEDERAL SHARE 744.98 = TOTAL AMOUNT 943.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 377.04, 1418.43, 1795.47

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.5736 KENNEDY CHIGLO		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 544 WEST SCHUBERT AVE.		Allocated Activity or Event Year-To-Date 35561.23	
City State Zip Code CHICAGO IL 60614	001 Category/ Type	Date <input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: PAYROLL		Allocated Activity or Event Year-To-Date 35561.23	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="34.45"/> + <input type="text" value="129.62"/> = <input type="text" value="164.07"/>			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.5777 SARA KARLOVICS		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 7941		Allocated Activity or Event Year-To-Date 41966.62	
City State Zip Code GURNEE IL 60031	003 Category/ Type	Date <input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: FUNDRAISING CONSULTING		Allocated Activity or Event Year-To-Date 41966.62	
Activity or Event Identifier: 2.25.14 Fundraising Event(02/25/2014)			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="8129.28"/> + <input type="text" value="4572.72"/> = <input type="text" value="12702.00"/>			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.5779 SARA KARLOVICS		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 7941		Allocated Activity or Event Year-To-Date 42039.88	
City State Zip Code GURNEE IL 60031	003 Category/ Type	Date <input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO		Allocated Activity or Event Year-To-Date 42039.88	
Activity or Event Identifier: 2.25.14 Fundraising Event(02/25/2014)			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="46.89"/> + <input type="text" value="26.37"/> = <input type="text" value="73.26"/>			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="8210.62"/>		<input type="text" value="4728.71"/>		<input type="text" value="12939.33"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.5782 WALGREENS Mailing Address 1470 S. MILWAUKEE AVE. City LIBERTYVILLE State IL Zip Code 60048 Purpose of Disbursement: DONOR MOMENTOS [H4.5779] Activity or Event Identifier: 2.25.14 Fundraising Event(02/25/2014) [MEMO ITEM]		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 42039.88 Date <input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2014"/> Category/Type <input type="text" value="001"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 46.89 _____ 26.37 _____ 73.26		

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.5749 CHRISTINA MARTIN DESIGN Mailing Address PO BOX 64897 City AUSTIN State TX Zip Code 78704 Purpose of Disbursement: DESIGN SERVICES Activity or Event Identifier: 2.25.14 Fundraising Event(02/25/2014)		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 42439.88 Date <input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2014"/> Category/Type <input type="text" value="003"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 256.00 _____ 144.00 _____ 400.00		

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.5788 UNION LEAGUE CLUB Mailing Address 65 W JACKSON BOULEVARD City CHICAGO State IL Zip Code 60604 Purpose of Disbursement: ROOM RENTAL AND CATERING SERVICES Activity or Event Identifier: 3.19.14 Fundraising Event(03/19/2014)		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 7680.25 Date <input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2014"/> Category/Type <input type="text" value="003"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 76.13 _____ 25.37 _____ 101.50		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 332.13		_____ 169.37		_____ 501.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.6246 HUB 51		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 51 W. HUBBARD ST.			
City CHICAGO	State IL	Zip Code 60654	
Purpose of Disbursement: FACILITY RENTAL & CATERING SERVICES		003	Allocated Activity or Event Year-To-Date 1500.00
Activity or Event Identifier: 5.05.14 Fundraising Event(05/05/2014)		Category/ Type	Date <input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="1425.00"/> + <input type="text" value="75.00"/> = <input type="text" value="1500.00"/>			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.5743 NORTH SHORE PRINTERS		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 535 SOUTH SHERIDAN ROAD			
City WAUKEGAN	State IL	Zip Code 60085	
Purpose of Disbursement: PRINTING		003	Allocated Activity or Event Year-To-Date 2051.00
Activity or Event Identifier: 5.05.14 Fundraising Event(05/05/2014)		Category/ Type	Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="523.45"/> + <input type="text" value="27.55"/> = <input type="text" value="551.00"/>			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.6237 FOUR SEASONS HOTEL - CHICAGO		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 120 E. DELAWARE PLACE			
City CHICAGO	State IL	Zip Code 60611	
Purpose of Disbursement: MEETING EXPENSE: MEALS		003	Allocated Activity or Event Year-To-Date 571.57
Activity or Event Identifier: 5.05.14 Fundraising Event_2(05/05/2014)		Category/ Type	Date <input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="382.51"/> + <input type="text" value="147.06"/> = <input type="text" value="529.57"/>			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2330.96"/>		<input type="text" value="249.61"/>		<input type="text" value="2580.57"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

