FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

ILLINOIS REPUBLICAN PARTY

ADDRESS (number and street) ▼ P.O. BOX 64897

☐ Check if different than previously reported. (ACC)

CHICAGO | IL | 60664 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00005926

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)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on 11 / 04 / 2014 in the State of IL

5. Covering Period 10 / 16 / 2014 through 11 / 24 / 2014

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 01 / 29 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only							

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: 10 / 16 / 2014 To: 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		71003.82
(b) Cash on Hand at Beginning of Reporting Period	322546.64	
(c) Total Receipts (from Line 19)	465703.13	2126619.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	788249.77	2197623.56
7. Total Disbursements (from Line 31)	695858.58	2105232.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	92391.19	92391.19
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	167369.70	

☐ 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: M M 10 / D D 16 / Y Y Y Y 2014 To: M M 11 / D D 24 / Y Y Y Y 2014

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)	66625.00	441607.28
(ii) Unitemized	5741.00	75659.71
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	72366.00	517266.99
(b) Political Party Committees	0.00	1500.00
(c) Other Political Committees (such as PACs)	138765.15	500365.15
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	211131.15	1019132.14
12. Transfers From Affiliated/Other Party Committees	234571.98	1002645.74
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	477.96
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	5000.00	5000.00
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)	15000.00	99363.90
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	15000.00	99363.90
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	465703.13	2126619.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	450703.13	2027255.84

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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	14605.44	132286.69
(ii) Non-Federal Share	54820.45	334695.86
(b) Other Federal Operating Expenditures	110937.19	226385.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	180363.08	693368.37
22. Transfers to Affiliated/Other Party Committees	0.00	25000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	22561.15	22561.15
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	13258.31	28265.18
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	33083.79
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	479676.04	1302953.88
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	479676.04	1302953.88
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	695858.58	2105232.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	641038.13	1770536.51

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	211131.15	1019132.14
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	211131.15	1019132.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	125542.63	358672.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	477.96
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	125542.63	358194.55

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 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

A. Full Name (Last, First, Middle Initial)
KENNETH W ALDRIDGE

Mailing Address 844 E ROCKLAND ROAD

City: LIBERTYVILLE State: IL Zip Code: 60048-3358

FEC ID number of contributing federal political committee. C

Name of Employer: ALDRIDGE ELECTRIC, INC.
Occupation: PRESIDENT & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 22 / 2014
Transaction ID : SA11AI.9597

Amount of Each Receipt this Period: 10000.00

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

Mailing Address 5943 N EAST CIR

City: CHICAGO State: IL Zip Code: 60631

FEC ID number of contributing federal political committee. C

Name of Employer: SELF-EMPLOYED
Occupation: CONSULTANT

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 27 / 2014
Transaction ID : SA11AI.9660

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 7070 CHERRYVALE NORTH BOULEVARD

City: ROCKFORD State: IL Zip Code: 61112-1002

FEC ID number of contributing federal political committee. C

Name of Employer: LOU BACHRODT CHEVROLET
Occupation: PRESIDENT

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 22 / 2014
Transaction ID : SA11AI.9716

Amount of Each Receipt this Period: 2000.00

SUBTOTAL of Receipts This Page (optional) ▶ 13000.00

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): VICTOR BOTH
Mailing Address: 10563 S LONGWOOD DRIVE
City: CHICAGO State: IL Zip Code: 60643-2615
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: 1500.00
Date of Receipt: 10 / 24 / 2014
Transaction ID : SA11AI.9730
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): DR. MANDAN BOZORGI
Mailing Address: 1351 E WESTLEIGH RD
City: LAKE FOREST State: IL Zip Code: 60045
FEC ID number of contributing federal political committee: C
Name of Employer: MAGNA HEALTH SYSTEMS
Occupation: DOCTOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 10 / 22 / 2014
Transaction ID : SA11AI.9722
Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial): JACK A BUZBEE
Mailing Address: 200 E DOUGLAS STREET
City: DE SOTO State: IL Zip Code: 62924-1512
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: 11 / 05 / 2014
Transaction ID : SA11AI.9708
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 2600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): CHARLES P CAREY
Mailing Address: 604 52ND PL
City: WESTERN SPRINGS State: IL Zip Code: 60558
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: SELF-EMPLOYED
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10/22/2014
Transaction ID : SA11AI.9803
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): RICHARD COLBURN
Mailing Address: 555 SKOKIE BOULEVARD SUITE 555
City: NORTHBROOK State: IL Zip Code: 60062-2854
FEC ID number of contributing federal political committee: C
Name of Employer: ROLLED ALLOYS MGMT. SERVICES
Occupation: EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 10000.00
Date of Receipt: 10/21/2014
Transaction ID : SA11AI.9560
Amount of Each Receipt this Period: 10000.00

C. Full Name (Last, First, Middle Initial): DAVID DOMEK
Mailing Address: 411 RIDGE LN
City: LAKE IN THE HILLS State: IL Zip Code: 60156
FEC ID number of contributing federal political committee: C
Name of Employer: DOMEK LOGISTICS
Occupation: LOGISTICS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1250.00
Date of Receipt: 10/22/2014
Transaction ID : SA11AI.9599
Amount of Each Receipt this Period: 1250.00

SUBTOTAL of Receipts This Page (optional) ▶ 11750.00

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MIKE DOMEK

Mailing Address 265 EXCHANGE DR
STE 201

City: CRYSTAL LAKE
State: IL
Zip Code: 60014

FEC ID number of contributing federal political committee. C

Name of Employer: SELF-EMPLOYED
Occupation: SELF-EMPLOYED

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 22 / 2014

Transaction ID : SA11AI.9718

Amount of Each Receipt this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
CYRUS F. FREIDHAM JR.

Mailing Address 11105 OLD HARBOUR RD.

City: NORTH PALM BEACH
State: FL
Zip Code: 33408

FEC ID number of contributing federal political committee. C

Name of Employer: BEST EFFORTS
Occupation: INFORMATION REQUESTED

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 22 / 2014

Transaction ID : SA11AI.9856

Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
MR. MARK GOLD

Mailing Address 2020 N LINCOLN PARK W
UNIT 38 E

City: CHICAGO
State: IL
Zip Code: 60614

FEC ID number of contributing federal political committee. C

Name of Employer: TOP THIRD AG MARKETING
Occupation: COMMODITY BROKER

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 22 / 2014

Transaction ID : SA11AI.9697

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 8000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
HABEEB G HABEEB

Mailing Address 1614 ENGLISH OAK DRIVE

City: CHAMPAIGN State: IL Zip Code: 61822-3302

FEC ID number of contributing federal political committee. C

Name of Employer: BENEFIT PLANNING CNSLTS.
Occupation: CONSULTANT

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 24 / 2014
Transaction ID : SA11AI.9836

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
MICHAEL D HEILMANN

Mailing Address 5S324 MIDDLE ROAD

City: NAPERVILLE State: IL Zip Code: 60563-8511

FEC ID number of contributing federal political committee. C

Name of Employer: WI-TRONIX, LLC
Occupation: EXECUTIVE

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 21 / 2014
Transaction ID : SA11AI.9607

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
DAVID G HILL

Mailing Address 5431 N. KILDARE

City: CHICAGO State: IL Zip Code: 60630

FEC ID number of contributing federal political committee. C

Name of Employer: SELF-EMPLOYED
Occupation: TRADER

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 22 / 2014
Transaction ID : SA11AI.9808

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
DAVID D HILLER

Mailing Address 1550 N STATE PARKWAY
APT. 301

City: CHICAGO
State: IL
Zip Code: 60610-7929

FEC ID number of contributing federal political committee.: C

Name of Employer: ROBERT R. MCCORMACK FOUNDATION
Occupation: MANAGER

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 17 / 2014

Transaction ID : SA11AI.9840

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 6020 ARBOR LN
#303

City: NORTHFIELD
State: IL
Zip Code: 60093

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 ▼ 1000.00

Date of Receipt: 10 / 22 / 2014

Transaction ID : SA11AI.9601

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
MR. FRANK L KARKAZIS

Mailing Address 1665 DUFFY LN

City: BANNOCKBURN
State: IL
Zip Code: 60015

FEC ID number of contributing federal political committee.: C

Name of Employer: SELF-EMPLOYED
Occupation: DENTIST

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 31 / 2014

Transaction ID : SA11AI.9706

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
RONALD KRAMER

Mailing Address 2970 N LAKE SHORE DRIVE
APT. 6B

City: CHICAGO | State: IL | Zip Code: 60657-5783

FEC ID number of contributing federal political committee. C

Name of Employer: SEYFARTH SHAW
Occupation: ATTORNEY

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 11 / 14 / 2014

Transaction ID : SA11AI.9846

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
JAMES A LANGAN

Mailing Address 306 WOODLEY RD

City: WINNETKA | State: IL | Zip Code: 60093

FEC ID number of contributing federal political committee. C

Name of Employer: KIRKLAND ELLIS LLP
Occupation: PARTNER

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 22 / 2014

Transaction ID : SA11AI.9850

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
VERNON LOUCKS JR

Mailing Address 1101 SKOKIE BLVD
#240

City: NORTHBROOK | State: IL | Zip Code: 60062

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 ▼ 1000.00

Date of Receipt: 10 / 22 / 2014

Transaction ID : SA11AI.9720

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2100.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

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

Mailing Address 645 N WREN AVENUE

City: PALATINE | State: IL | Zip Code: 60067-3544

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 ▼ 550.00

Date of Receipt: 10 / 24 / 2014

Transaction ID : SA11AI.9609

Amount of Each Receipt this Period: 300.00

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

Mailing Address PO BOX 748

City: ST CHARLES | State: IL | Zip Code: 60174-0748

FEC ID number of contributing federal political committee. C

Name of Employer: MIDWEST GROUNDCOVERS LLC | Occupation: NURSERY FARMER

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt: 10 / 24 / 2014

Transaction ID : SA11AI.9725

Amount of Each Receipt this Period: 500.00

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

Mailing Address 110 S EVERGREEN AVENUE
APT. 6ES

City: ARLINGTON HEIGHTS | State: IL | Zip Code: 60005-1949

FEC ID number of contributing federal political committee. C

Name of Employer: NORTHRUP GRUMMAN, INC. | Occupation: EXECUTIVE

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 19 / 2014

Transaction ID : SA11AI.9688

Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 825.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
DAPHNE RODRIGUEZ

Mailing Address 3413 OWENS LN

City: DEKALB
State: IL
Zip Code: 60015

FEC ID number of contributing federal political committee.: C

Name of Employer: BEST EFFORTS
Occupation: INFORMATION REQUESTED

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M 10 / D D 29 / Y Y Y Y 2014

Transaction ID : SA11AI.9812

Amount of Each Receipt this Period
500.00

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

Mailing Address 3413 OWENS LN

City: DEKALB
State: IL
Zip Code: 60115

FEC ID number of contributing federal political committee.: C

Name of Employer: BEST EFFORTS
Occupation: INFORMATION REQUESTED

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M 10 / D D 29 / Y Y Y Y 2014

Transaction ID : SA11AI.9814

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MS. ELIZABETH SCHEINFELD

Mailing Address 107 SOUTH AVENUE

City: GLENCOE
State: IL
Zip Code: 60022

FEC ID number of contributing federal political committee.: C

Name of Employer: ROCKLEDGE CAPITAL CORP
Occupation: BUSINESSWOMAN

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M 10 / D D 31 / Y Y Y Y 2014

Transaction ID : SA11AI.9810

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 6000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM H. SENGER

Mailing Address 411 N. MARKET ST.

City: GRAFTON
State: IL
Zip Code: 62037-1148

FEC ID number of contributing federal political committee: C

Name of Employer: BEST EFFORTS
Occupation: INFORMATION REQUESTED

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 24 / 2014
Transaction ID : SA11AI.9668

Amount of Each Receipt this Period: 300.00

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

Mailing Address 2906 LINCOLN STREET

City: EVANSTON
State: IL
Zip Code: 60201

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED
Occupation: ATTORNEY

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 24 / 2014
Transaction ID : SA11AI.9675

Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
MR. ANDREW A. SZCZAWINSKI

Mailing Address 2326 N 74TH PLACE CT

City: ELMWOOD PARK
State: IL
Zip Code: 60707-2631

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 ▼ 250.00

Date of Receipt: 10 / 24 / 2014
Transaction ID : SA11AI.9625

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): EDMUND THORNTON
Mailing Address: PO BOX 1
City: OTTAWA State: IL Zip Code: 61350-0001
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED
Occupation: EDMUND THORNTON FOUNDATION
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11/02/2014
Transaction ID : SA11AI.9763
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): FRED VERDE
Mailing Address: 825 CHASE AVE
City: ELK GROVE VILLAGE State: IL Zip Code: 60007
FEC ID number of contributing federal political committee: C
Name of Employer: AVS MARKETING
Occupation: OWNER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 10000.00
Date of Receipt: 10/22/2014
Transaction ID : SA11AI.9724
Amount of Each Receipt this Period: 10000.00

C. Full Name (Last, First, Middle Initial): TOM WAKE
Mailing Address: PO BOX 3067
City: NAPERVILLE State: IL Zip Code: 60566
FEC ID number of contributing federal political committee: C
Name of Employer: EBY-BROWN
Occupation: EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10/22/2014
Transaction ID : SA11AI.9603
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 15250.00

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A.
Full Name (Last, First, Middle Initial): CHARLES T WEGNER IV
Mailing Address: PO BOX 262
City: WEST CHICAGO State: IL Zip Code: 60186
FEC ID number of contributing federal political committee: C
Name of Employer: JELSERT
Occupation: EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: M M 10 / D D 22 / Y Y Y Y 2014
Transaction ID : SA11AI.9805
Amount of Each Receipt this Period: 1000.00

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
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
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 66625.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 1061 AMERICAN LANE

City: SCHAUMBURG State: IL Zip Code: 60173

FEC ID number of contributing federal political committee. C C00255752

Name of Employer

Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 22 / 2014

Transaction ID : SA11C.9852

Amount of Each Receipt this Period: 5000.00

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

Mailing Address 228 S. WASHINGTON ST., STE. 115

City: ALEXANDRIA State: VA Zip Code: 22314

FEC ID number of contributing federal political committee. C C00412288

Name of Employer

Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 11 / 01 / 2014

Transaction ID : SA11C.9586

Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
ENTERPRISE HOLDINGS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 600 CORPORATE PARK DRIVE

City: ST. LOUIS State: MO Zip Code: 63105

FEC ID number of contributing federal political committee. C C00219642

Name of Employer

Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 11 / 04 / 2014

Transaction ID : SA11C.9783

Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 15000.00

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A.
Full Name (Last, First, Middle Initial): INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC
Mailing Address: 1900 K STREET NW, SUITE 700
City: WASHINGTON State: DC Zip Code: 20006
FEC ID number of contributing federal political committee: C C00084491
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: M M 10 / D D 24 / Y Y Y Y 2014
Transaction ID : SA11C.9834
Amount of Each Receipt this Period: 2500.00

B.
Full Name (Last, First, Middle Initial): PCS ADMINISTRATION (USA), INC. (ALSO KNOWN AS 'POTASHCORP') PAC
Mailing Address: 1101 SKOKIE BOULEVARD, SUITE 400
City: NORTHBROOK State: IL Zip Code: 60062
FEC ID number of contributing federal political committee: C C00385039
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00
Date of Receipt: M M 10 / D D 16 / Y Y Y Y 2014
Transaction ID : SA11C.9827
Amount of Each Receipt this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): RANDY HULTGREN FOR CONGRESS
Mailing Address: PO BOX 717
City: ST CHARLES State: IL Zip Code: 60174
FEC ID number of contributing federal political committee: C C00467522
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 75000.00
Date of Receipt: M M 10 / D D 21 / Y Y Y Y 2014
Transaction ID : SA11C.9587
Amount of Each Receipt this Period: 25000.00

SUBTOTAL of Receipts This Page (optional) ▶ 32500.00

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
RANDY HULTGREN FOR CONGRESS

Mailing Address PO BOX 717

City: ST CHARLES State: IL Zip Code: 60174

FEC ID number of contributing federal political committee. C C00467522

Name of Employer

Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 76250.00

Date of Receipt: 11 / 24 / 2014

Transaction ID : SA11C.9853

Amount of Each Receipt this Period 1250.00

B. Full Name (Last, First, Middle Initial)
ROSKAM FOR CONGRESS COMMITTEE

Mailing Address P. O. BOX 713

City: WHEATON State: IL Zip Code: 60187

FEC ID number of contributing federal political committee. C C00330043

Name of Employer

Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 70000.00

Date of Receipt: 10 / 22 / 2014

Transaction ID : SA11C.9680

Amount of Each Receipt this Period 10000.00

C. Full Name (Last, First, Middle Initial)
SCHOCK FOR CONGRESS

Mailing Address PO BOX 10555

City: PEORIA State: IL Zip Code: 61612

FEC ID number of contributing federal political committee. C C00437756

Name of Employer

Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 32000.00

Date of Receipt: 10 / 16 / 2014

Transaction ID : SA11C.9758

Amount of Each Receipt this Period 32000.00

SUBTOTAL of Receipts This Page (optional) ▶ 43250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
SCHOCK FOR CONGRESS

Mailing Address PO BOX 10555

City: PEORIA
State: IL
Zip Code: 61612

FEC ID number of contributing federal political committee: C C00437756

Name of Employer:
Occupation:

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 42000.00

Date of Receipt: 10 / 20 / 2014
Transaction ID : SA11C.9558

Amount of Each Receipt this Period: 10000.00

B. Full Name (Last, First, Middle Initial)
SENGER FOR CONGRESS

Mailing Address PO BOX 4883

City: NAPERVILLE
State: IL
Zip Code: 60567

FEC ID number of contributing federal political committee: C C00544734

Name of Employer:
Occupation:

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 68550.00

Date of Receipt: 10 / 20 / 2014
Transaction ID : SA11C.9828

Amount of Each Receipt this Period: 21650.00

C. Full Name (Last, First, Middle Initial)
SENGER FOR CONGRESS

Mailing Address PO BOX 4883

City: NAPERVILLE
State: IL
Zip Code: 60567

FEC ID number of contributing federal political committee: C C00544734

Name of Employer:
Occupation:

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 71550.00

Date of Receipt: 10 / 22 / 2014
Transaction ID : SA11C.9830

Amount of Each Receipt this Period: 3000.00

SUBTOTAL of Receipts This Page (optional) ▶ 34650.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A.
Full Name (Last, First, Middle Initial): VOLUNTEERS FOR SHIMKUS
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 ▼: 91360.00
Date of Receipt: 10 / 29 / 2014
Transaction ID : SA11C.9868
Amount of Each Receipt this Period: 12160.00
TRAVEL STIPEND GIFT CARDS

B.
Full Name (Last, First, Middle Initial): VOLUNTEERS FOR SHIMKUS
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 ▼: 92565.15
Date of Receipt: 11 / 04 / 2014
Transaction ID : SA11C.9870
Amount of Each Receipt this Period: 1205.15
EVENT RENTAL/CATERING SERVICES

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
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 13365.15

TOTAL This Period (last page this line number only) ▶ 138765.15

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): SAMINA AHMAD
Mailing Address: 24 CARDINAL DR
City: MURPHYSBORO State: IL Zip Code: 62966
FEC ID number of contributing federal political committee: C
Name of Employer: HOMEMAKER
Occupation: HOMEMAKER
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 10 / 31 / 2014
Transaction ID : SA12.9899
Amount of Each Receipt this Period: 2500.00
ILLINOIS MAJORITY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): ILLINOIS MAJORITY FUND; THE
Mailing Address: PO BOX 9891
City: ARLINGTON State: VA Zip Code: 22219
FEC ID number of contributing federal political committee: C C00566646
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 24424.99
Date of Receipt: 10 / 28 / 2014
Transaction ID : SA12.9895
Amount of Each Receipt this Period: 11485.86
JOINT FUNDRAISING COMMITTEE: SEE MEMO ENTRIES

C. Full Name (Last, First, Middle Initial): ILLINOIS MAJORITY FUND; THE
Mailing Address: PO BOX 9891
City: ARLINGTON State: VA Zip Code: 22219
FEC ID number of contributing federal political committee: C C00566646
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 27401.11
Date of Receipt: 10 / 31 / 2014
Transaction ID : SA12.9896
Amount of Each Receipt this Period: 2976.12
JOINT FUNDRAISING COMMITTEE: SEE MEMO ENTRIES

SUBTOTAL of Receipts This Page (optional) ▶ 14461.98

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
ZAHOOR MAKHDOOM

Mailing Address 1220 DA CLA MAR CT

City: CARBONDALE State: IL Zip Code: 62901

FEC ID number of contributing federal political committee. C

Name of Employer: SOUTHERN IL GI SPECIALISTS LLC
Occupation: PHYSICIAN

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2014

Transaction ID : SA12.9901

Amount of Each Receipt this Period: 10000.00

ILLINOIS MAJORITY FUND

[MEMO ITEM]

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

Mailing Address 1415 W HWY 50

City: O'FALLON State: IL Zip Code: 62269

FEC ID number of contributing federal political committee. C

Name of Employer: BELTONE HEARING AID CENTER
Occupation: HEALTHCARE

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 10 / D D 28 / Y Y Y Y 2014

Transaction ID : SA12.9903

Amount of Each Receipt this Period: 500.00

ILLINOIS MAJORITY FUND

[MEMO ITEM]

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

Mailing Address 320 FIRST STREET SE

City: WASHINGTON State: DC Zip Code: 20003

FEC ID number of contributing federal political committee. C C00075820

Name of Employer:
Occupation:

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 407000.00

Date of Receipt: M M 10 / D D 20 / Y Y Y Y 2014

Transaction ID : SA12.9915

Amount of Each Receipt this Period: 80000.00

SUBTOTAL of Receipts This Page (optional) ▶ 80000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

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

Mailing Address 320 FIRST STREET SE
.

City: WASHINGTON
State: DC
Zip Code: 20003

FEC ID number of contributing federal political committee. C C00075820

Name of Employer:
Occupation:

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 437000.00

Date of Receipt: 10 / 22 / 2014
Transaction ID : SA12.9916

Amount of Each Receipt this Period: 30000.00

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

Mailing Address 320 FIRST STREET SE
.

City: WASHINGTON
State: DC
Zip Code: 20003

FEC ID number of contributing federal political committee. C C00075820

Name of Employer:
Occupation:

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 459000.00

Date of Receipt: 10 / 28 / 2014
Transaction ID : SA12.9919

Amount of Each Receipt this Period: 22000.00

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

Mailing Address 320 FIRST STREET SE
.

City: WASHINGTON
State: DC
Zip Code: 20003

FEC ID number of contributing federal political committee. C C00075820

Name of Employer:
Occupation:

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 469000.00

Date of Receipt: 11 / 03 / 2014
Transaction ID : SA12.9921

Amount of Each Receipt this Period: 10000.00

SUBTOTAL of Receipts This Page (optional) ▶ 62000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): GEORGE OBERNAGLE III
Mailing Address: 4 COUNTRY LAKES LN
City: WATERLOO State: IL Zip Code: 62298
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: FARMER
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 10/28/2014
Transaction ID : SA12.9905
Amount of Each Receipt this Period: 100.00
ILLINOIS MAJORITY FUND
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): KIMBERLY OELZE
Mailing Address: PO BOX 325
City: NASHVILLE State: IL Zip Code: 62263
FEC ID number of contributing federal political committee: C
Name of Employer: OELZE EQUIP. LLC
Occupation: INDEPENDENT OIL PRODUCER
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10/31/2014
Transaction ID : SA12.9907
Amount of Each Receipt this Period: 500.00
ILLINOIS MAJORITY FUND
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): 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: 506244.63
Date of Receipt: 11/03/2014
Transaction ID : SA12.9923
Amount of Each Receipt this Period: 78110.00

SUBTOTAL of Receipts This Page (optional) ▶ 78110.00

TOTAL This Period (last page this line number only) ▶ 234571.98

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A.
Full Name (Last, First, Middle Initial): SENGER FOR CONGRESS
Mailing Address: PO BOX 4883
City: NAPERVILLE State: IL Zip Code: 60567
FEC ID number of contributing federal political committee: C C00544734
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 76550.00
Date of Receipt: 11 / 18 / 2014
Transaction ID : SA16.9925
Amount of Each Receipt this Period: 5000.00
CONTRIBUTION REFUND

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
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
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 5000.00

TOTAL This Period (last page this line number only) ▶ 5000.00

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): 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:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9544
Amount of Each Disbursement this Period: 3500.00

B. Full Name (Last, First, Middle Initial): ALAMO
Mailing Address: 600 CORPORATE PARK DR
City: ST LOUIS State: MO Zip Code: 63105
Purpose of Disbursement: TRAVEL: CAR RENTAL
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 19 / 2014
Transaction ID : SB21B.9227
Amount of Each Disbursement this Period: 409.36

C. Full Name (Last, First, Middle Initial): ALAMO
Mailing Address: 600 CORPORATE PARK DR
City: ST LOUIS State: MO Zip Code: 63105
Purpose of Disbursement: TRAVEL: CAR RENTAL
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 20 / 2014
Transaction ID : SB21B.9226
Amount of Each Disbursement this Period: 607.31

SUBTOTAL of Disbursements This Page (optional) ▶ 4516.67

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 17 / 2014
Transaction ID : SB21B.9265
Amount of Each Disbursement this Period: 337.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9236
Amount of Each Disbursement this Period: 166.10

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9237
Amount of Each Disbursement this Period: 227.10

SUBTOTAL of Disbursements This Page (optional) ▶ 730.40

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9238
Amount of Each Disbursement this Period: 390.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9239
Amount of Each Disbursement this Period: 393.20

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9240
Amount of Each Disbursement this Period: 393.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1176.60

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)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 20 / Y Y Y Y 2014
Transaction ID : SB21B.9241
Amount of Each Disbursement this Period: 393.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 20 / Y Y Y Y 2014
Transaction ID : SB21B.9242
Amount of Each Disbursement this Period: 393.20

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 20 / Y Y Y Y 2014
Transaction ID : SB21B.9243
Amount of Each Disbursement this Period: 393.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1179.60

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 20 / Y Y Y Y 2014
Transaction ID : SB21B.9244
Amount of Each Disbursement this Period: 393.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 20 / Y Y Y Y 2014
Transaction ID : SB21B.9245
Amount of Each Disbursement this Period: 393.20

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 20 / Y Y Y Y 2014
Transaction ID : SB21B.9246
Amount of Each Disbursement this Period: 393.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1179.60

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9247
Amount of Each Disbursement this Period: 393.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9248
Amount of Each Disbursement this Period: 393.20

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9249
Amount of Each Disbursement this Period: 393.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1179.60

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9250
Amount of Each Disbursement this Period: 393.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9251
Amount of Each Disbursement this Period: 393.20

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9252
Amount of Each Disbursement this Period: 398.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1184.60

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9253
Amount of Each Disbursement this Period: 398.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9254
Amount of Each Disbursement this Period: 398.20

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9255
Amount of Each Disbursement this Period: 398.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1194.60

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9256
Amount of Each Disbursement this Period: 398.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9257
Amount of Each Disbursement this Period: 398.20

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9258
Amount of Each Disbursement this Period: 398.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1194.60

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9259
Amount of Each Disbursement this Period: 398.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9260
Amount of Each Disbursement this Period: 398.20

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9261
Amount of Each Disbursement this Period: 398.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1194.60

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9262
Amount of Each Disbursement this Period: 398.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9263
Amount of Each Disbursement this Period: 418.20

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9264
Amount of Each Disbursement this Period: 418.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1234.60

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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 23 / 2014
Transaction ID : SB21B.9234
Amount of Each Disbursement this Period: 498.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 23 / 2014
Transaction ID : SB21B.9235
Amount of Each Disbursement this Period: 530.20

C. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 24 / 2014
Transaction ID : SB21B.9233
Amount of Each Disbursement this Period: 498.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1526.60

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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 27 / 2014
Transaction ID : SB21B.9231
Amount of Each Disbursement this Period: 570.20

B. Full Name (Last, First, Middle Initial): AMERICAN AIRLINES
Mailing Address: 4255 AMON CARTER BLVD. MD 2400
City: FORT WORTH State: TX Zip Code: 76155
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 27 / 2014
Transaction ID : SB21B.9232
Amount of Each Disbursement this Period: 570.20

C. Full Name (Last, First, Middle Initial): CHICAGO CLUB
Mailing Address: 81 E VAN BUREN ST
City: CHICAGO State: IL Zip Code: 60605
Purpose of Disbursement: FACILITY RENTAL/CATERING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 27 / 2014
Transaction ID : SB21B.9551
Amount of Each Disbursement this Period: 4113.40

SUBTOTAL of Disbursements This Page (optional) ▶ 5253.80

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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
COURTYARD MARRIOTT CHICAGO

Mailing Address 30 E HUBBARD STREET

City: CHICAGO State: IL Zip Code: 60611

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9278

Amount of Each Disbursement this Period: 604.12

B. Full Name (Last, First, Middle Initial)
COURTYARD MARRIOTT NAPERVILLE

Mailing Address 1155 E DIEHL ROAD

City: NAPERVILLE State: IL Zip Code: 60563

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 03 / 2014

Transaction ID : SB21B.9281

Amount of Each Disbursement this Period: 1105.14

C. Full Name (Last, First, Middle Initial)
COURTYARD MARRIOTT NAPERVILLE

Mailing Address 1155 E DIEHL ROAD

City: NAPERVILLE State: IL Zip Code: 60563

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 10 / 2014

Transaction ID : SB21B.9280

Amount of Each Disbursement this Period: 2888.16

SUBTOTAL of Disbursements This Page (optional) ▶ 4597.42

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9294
Amount of Each Disbursement this Period: 545.20

B. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9295
Amount of Each Disbursement this Period: 545.20

C. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9296
Amount of Each Disbursement this Period: 545.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1635.60

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 20 / Y Y Y Y 2014
Transaction ID : SB21B.9297
Amount of Each Disbursement this Period: 545.20

B. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 20 / Y Y Y Y 2014
Transaction ID : SB21B.9298
Amount of Each Disbursement this Period: 545.20

C. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 20 / Y Y Y Y 2014
Transaction ID : SB21B.9299
Amount of Each Disbursement this Period: 545.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1635.60

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2014
Transaction ID : SB21B.9288
Amount of Each Disbursement this Period: 337.25

B. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2014
Transaction ID : SB21B.9289
Amount of Each Disbursement this Period: 337.25

C. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2014
Transaction ID : SB21B.9290
Amount of Each Disbursement this Period: 337.25

SUBTOTAL of Disbursements This Page (optional) ▶ 1011.75

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2014
Transaction ID : SB21B.9291
Amount of Each Disbursement this Period: 337.25

B. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2014
Transaction ID : SB21B.9292
Amount of Each Disbursement this Period: 337.25

C. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2014
Transaction ID : SB21B.9293
Amount of Each Disbursement this Period: 360.40

SUBTOTAL of Disbursements This Page (optional) ▶ 1034.90

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 05 / 2014
Transaction ID : SB21B.9286
Amount of Each Disbursement this Period: 337.25

B. Full Name (Last, First, Middle Initial): DELTA AIR LINES
Mailing Address: 1030 DELTA BLVD.
City: ATLANTA State: GA Zip Code: 30354
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 05 / 2014
Transaction ID : SB21B.9287
Amount of Each Disbursement this Period: 337.25

C. Full Name (Last, First, Middle Initial): ENTERPRISE RENT-A-CAR
Mailing Address: 4940 RIVER ROAD
City: SCHILLER PARK State: IL Zip Code: 60176
Purpose of Disbursement: TRAVEL: CAR RENTAL
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 06 / 2014
Transaction ID : SB21B.9321
Amount of Each Disbursement this Period: 511.02

SUBTOTAL of Disbursements This Page (optional) ▶ 1185.52

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9314

Amount of Each Disbursement this Period: 309.89

B. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9315

Amount of Each Disbursement this Period: 427.02

C. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9316

Amount of Each Disbursement this Period: 433.55

SUBTOTAL of Disbursements This Page (optional) ▶ 1170.46

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9317

Amount of Each Disbursement this Period: 545.41

B. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9318

Amount of Each Disbursement this Period: 638.14

C. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9319

Amount of Each Disbursement this Period: 644.22

SUBTOTAL of Disbursements This Page (optional) ▶ 1827.77

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9320

Amount of Each Disbursement this Period: 746.72

B. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 12 / 2014

Transaction ID : SB21B.9310

Amount of Each Disbursement this Period: 277.55

C. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 12 / 2014

Transaction ID : SB21B.9311

Amount of Each Disbursement this Period: 348.69

SUBTOTAL of Disbursements This Page (optional) ▶ 1372.96

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 12 / 2014

Transaction ID : SB21B.9312

Amount of Each Disbursement this Period: 424.85

B. Full Name (Last, First, Middle Initial)
ENTERPRISE RENT-A-CAR

Mailing Address 4940 RIVER ROAD

City: SCHILLER PARK State: IL Zip Code: 60176

Purpose of Disbursement: TRAVEL: CAR RENTAL

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 12 / 2014

Transaction ID : SB21B.9313

Amount of Each Disbursement this Period: 755.90

C. Full Name (Last, First, Middle Initial)
FAIRFIELD INN MOLINE

Mailing Address 2705 48TH AVE

City: MOLINE State: IL Zip Code: 61265

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 03 / 2014

Transaction ID : SB21B.9332

Amount of Each Disbursement this Period: 117.52

SUBTOTAL of Disbursements This Page (optional) ▶ 1298.27

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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): FAIRFIELD INN MOLINE
Mailing Address: 2705 48TH AVE
City: MOLINE State: IL Zip Code: 61265
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2014
Transaction ID : SB21B.9333
Amount of Each Disbursement this Period: 117.52

B. Full Name (Last, First, Middle Initial): FAIRFIELD INN MOLINE
Mailing Address: 2705 48TH AVE
City: MOLINE State: IL Zip Code: 61265
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2014
Transaction ID : SB21B.9334
Amount of Each Disbursement this Period: 117.52

C. Full Name (Last, First, Middle Initial): FAIRFIELD INN MOLINE
Mailing Address: 2705 48TH AVE
City: MOLINE State: IL Zip Code: 61265
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 06 / 2014
Transaction ID : SB21B.9327
Amount of Each Disbursement this Period: 587.60

SUBTOTAL of Disbursements This Page (optional) ▶ 822.64

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
FAIRFIELD INN MOLINE

Mailing Address 2705 48TH AVE

City: MOLINE State: IL Zip Code: 61265

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 06 / 2014

Transaction ID : SB21B.9328

Amount of Each Disbursement this Period: 587.60

B. Full Name (Last, First, Middle Initial)
FAIRFIELD INN MOLINE

Mailing Address 2705 48TH AVE

City: MOLINE State: IL Zip Code: 61265

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 06 / 2014

Transaction ID : SB21B.9329

Amount of Each Disbursement this Period: 587.60

C. Full Name (Last, First, Middle Initial)
FAIRFIELD INN MOLINE

Mailing Address 2705 48TH AVE

City: MOLINE State: IL Zip Code: 61265

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 06 / 2014

Transaction ID : SB21B.9330

Amount of Each Disbursement this Period: 587.60

SUBTOTAL of Disbursements This Page (optional) ▶ 1762.80

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
FAIRFIELD INN MOLINE

Mailing Address 2705 48TH AVE

City: MOLINE State: IL Zip Code: 61265

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9323

Amount of Each Disbursement this Period: 117.52

B. Full Name (Last, First, Middle Initial)
FAIRFIELD INN MOLINE

Mailing Address 2705 48TH AVE

City: MOLINE State: IL Zip Code: 61265

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9324

Amount of Each Disbursement this Period: 117.52

C. Full Name (Last, First, Middle Initial)
FAIRFIELD INN MOLINE

Mailing Address 2705 48TH AVE

City: MOLINE State: IL Zip Code: 61265

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9325

Amount of Each Disbursement this Period: 117.52

SUBTOTAL of Disbursements This Page (optional) ▶ 352.56

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): FAIRFIELD INN MOLINE
Mailing Address: 2705 48TH AVE
City: MOLINE State: IL Zip Code: 61265
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 07 / 2014
Transaction ID : SB21B.9326
Amount of Each Disbursement this Period: 117.52

B. Full Name (Last, First, Middle Initial): FLS CONNECT, LLC
Mailing Address: 7300 HUDSON BLVD., N
City: SAINT PAUL State: MN Zip Code: 55128
Purpose of Disbursement: FUNDRAISING CONSULTING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 27 / 2014
Transaction ID : SB21B.9543
Amount of Each Disbursement this Period: 2731.00

C. Full Name (Last, First, Middle Initial): HAMPTON INN
Mailing Address: 3185 S DIRKSEN PKWY
City: SPRINGFIELD State: IL Zip Code: 62703
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 13 / 2014
Transaction ID : SB21B.9336
Amount of Each Disbursement this Period: 6678.56

SUBTOTAL of Disbursements This Page (optional) ▶ 9527.08

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)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
HOLIDAY INN GURNEE

Mailing Address 6161 W GRAND AVE

City: GURNEE State: IL Zip Code: 60031

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9338

Amount of Each Disbursement this Period: 493.95

B. Full Name (Last, First, Middle Initial)
HOLIDAY INN GURNEE

Mailing Address 6161 W GRAND AVE

City: GURNEE State: IL Zip Code: 60031

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9339

Amount of Each Disbursement this Period: 493.95

C. Full Name (Last, First, Middle Initial)
HOLIDAY INN GURNEE

Mailing Address 6161 W GRAND AVE

City: GURNEE State: IL Zip Code: 60031

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9340

Amount of Each Disbursement this Period: 683.34

SUBTOTAL of Disbursements This Page (optional) ▶ 1671.24

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)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): HOLIDAY INN GURNEE
Mailing Address: 6161 W GRAND AVE
City: GURNEE State: IL Zip Code: 60031
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 07 / 2014
Transaction ID : SB21B.9341
Amount of Each Disbursement this Period: 683.34

B. Full Name (Last, First, Middle Initial): HOLIDAY INN GURNEE
Mailing Address: 6161 W GRAND AVE
City: GURNEE State: IL Zip Code: 60031
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 07 / 2014
Transaction ID : SB21B.9342
Amount of Each Disbursement this Period: 683.34

C. Full Name (Last, First, Middle Initial): HOLIDAY INN GURNEE
Mailing Address: 6161 W GRAND AVE
City: GURNEE State: IL Zip Code: 60031
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 07 / 2014
Transaction ID : SB21B.9343
Amount of Each Disbursement this Period: 683.34

SUBTOTAL of Disbursements This Page (optional) ▶ 2050.02

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
HOLIDAY INN GURNEE

Mailing Address 6161 W GRAND AVE

City: GURNEE State: IL Zip Code: 60031

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9344

Amount of Each Disbursement this Period: 683.34

B. Full Name (Last, First, Middle Initial)
HOLIDAY INN GURNEE

Mailing Address 6161 W GRAND AVE

City: GURNEE State: IL Zip Code: 60031

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9345

Amount of Each Disbursement this Period: 683.34

C. Full Name (Last, First, Middle Initial)
HOLIDAY INN GURNEE

Mailing Address 6161 W GRAND AVE

City: GURNEE State: IL Zip Code: 60031

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9346

Amount of Each Disbursement this Period: 683.34

SUBTOTAL of Disbursements This Page (optional) ▶ 2050.02

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): HOLIDAY INN GURNEE
Mailing Address: 6161 W GRAND AVE
City: GURNEE State: IL Zip Code: 60031
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 07 / 2014
Transaction ID : SB21B.9347
Amount of Each Disbursement this Period: 683.34

B. Full Name (Last, First, Middle Initial): HOLIDAY INN GURNEE
Mailing Address: 6161 W GRAND AVE
City: GURNEE State: IL Zip Code: 60031
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 07 / 2014
Transaction ID : SB21B.9348
Amount of Each Disbursement this Period: 683.34

C. Full Name (Last, First, Middle Initial): HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS
Mailing Address: 313 SALEM PL
City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2014
Transaction ID : SB21B.9365
Amount of Each Disbursement this Period: 101.70

SUBTOTAL of Disbursements This Page (optional) ▶ 1468.38

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 03 / 2014

Transaction ID : SB21B.9366

Amount of Each Disbursement this Period: 101.70

B. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 03 / 2014

Transaction ID : SB21B.9367

Amount of Each Disbursement this Period: 101.70

C. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 06 / 2014

Transaction ID : SB21B.9362

Amount of Each Disbursement this Period: 508.50

SUBTOTAL of Disbursements This Page (optional) ▶ 711.90

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 06 / 2014

Transaction ID : SB21B.9363

Amount of Each Disbursement this Period: 610.20

B. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9351

Amount of Each Disbursement this Period: 203.40

C. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9352

Amount of Each Disbursement this Period: 508.50

SUBTOTAL of Disbursements This Page (optional) ▶ 1322.10

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9353

Amount of Each Disbursement this Period: 711.90

B. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9354

Amount of Each Disbursement this Period: 711.90

C. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9355

Amount of Each Disbursement this Period: 711.90

SUBTOTAL of Disbursements This Page (optional) ▶ 2135.70

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9356

Amount of Each Disbursement this Period: 711.90

B. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9357

Amount of Each Disbursement this Period: 711.90

C. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9358

Amount of Each Disbursement this Period: 711.90

SUBTOTAL of Disbursements This Page (optional) ▶ 2135.70

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9359

Amount of Each Disbursement this Period: 711.90

B. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9360

Amount of Each Disbursement this Period: 711.90

C. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 07 / 2014

Transaction ID : SB21B.9361

Amount of Each Disbursement this Period: 1220.26

SUBTOTAL of Disbursements This Page (optional) ▶ 2644.06

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
HOLIDAY INN ST. LOUIS/FAIRVIEW HEIGHTS

Mailing Address 313 SALEM PL

City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 10 / 2014

Transaction ID : SB21B.9350

Amount of Each Disbursement this Period: 101.70

B. Full Name (Last, First, Middle Initial)
HOTEL DEL CORONADO

Mailing Address 1500 ORANGE AVE

City: CORONADO State: CA Zip Code: 92118

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 10 / 2014

Transaction ID : SB21B.9370

Amount of Each Disbursement this Period: 399.00

C. Full Name (Last, First, Middle Initial)
HOTEL DEL CORONADO

Mailing Address 1500 ORANGE AVE

City: CORONADO State: CA Zip Code: 92118

Purpose of Disbursement: TRAVEL: LODGING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 24 / 2014

Transaction ID : SB21B.9369

Amount of Each Disbursement this Period: 219.00

SUBTOTAL of Disbursements This Page (optional) ▶ 719.70

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)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): HOTELS.COM
Mailing Address: 5400 LBJ FREEWAY, SUITE 500
City: DALLAS State: TX Zip Code: 75240
Purpose of Disbursement: TRAVEL: LODGING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 21 / Y Y Y Y 2014
Transaction ID : SB21B.9371
Amount of Each Disbursement this Period: 4137.59

B. Full Name (Last, First, Middle Initial): LISA WAGNER & CO
Mailing Address: PO BOX 446
City: BATAVIA State: IL Zip Code: 60510
Purpose of Disbursement: FUNDRAISING CONSULTING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 18 / Y Y Y Y 2014
Transaction ID : SB21B.9385
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 17 / Y Y Y Y 2014
Transaction ID : SB21B.9451
Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6672.59

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 17 / 2014
Transaction ID : SB21B.9452
Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 17 / 2014
Transaction ID : SB21B.9453
Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 17 / 2014
Transaction ID : SB21B.9454
Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional) ▶ 105.00

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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9396

Amount of Each Disbursement this Period: 8.46

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9397

Amount of Each Disbursement this Period: 20.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9398

Amount of Each Disbursement this Period: 20.00

SUBTOTAL of Disbursements This Page (optional) ▶ 48.46

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9399

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9400

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9401

Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional) ▶ 105.00

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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9402
Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9403
Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9404
Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional) ▶ 105.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9405

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9406

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9407

Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional) ▶ 105.00

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9408
Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9409
Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9410
Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional) ▶ 105.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9411

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9412

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9413

Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional) ▶ 105.00

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SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9414

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9415

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9416

Amount of Each Disbursement this Period: 35.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9417

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9418

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9419

Amount of Each Disbursement this Period: 35.00

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ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9420

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9421

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9422

Amount of Each Disbursement this Period: 35.00

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9423

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9424

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9425

Amount of Each Disbursement this Period: 35.00

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9426

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9427

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9428

Amount of Each Disbursement this Period: 35.00

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9429

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9430

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9431

Amount of Each Disbursement this Period: 35.00

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SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9432
Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9433
Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9434
Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional) ▶ 105.00

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SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9435

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9436

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9437

Amount of Each Disbursement this Period: 35.00

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SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9438

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9439

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9440

Amount of Each Disbursement this Period: 35.00

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SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9441

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9442

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9443

Amount of Each Disbursement this Period: 35.00

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9444

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB21B.9445

Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 23 / 2014

Transaction ID : SB21B.9394

Amount of Each Disbursement this Period: 35.00

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FOR LINE NUMBER: (check only one)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 23 / 2014
Transaction ID : SB21B.9395
Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 24 / 2014
Transaction ID : SB21B.9393
Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 27 / 2014
Transaction ID : SB21B.9391
Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional) ▶ 105.00

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 27 / 2014
Transaction ID : SB21B.9392
Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 29 / 2014
Transaction ID : SB21B.9387
Amount of Each Disbursement this Period: 35.00

C. Full Name (Last, First, Middle Initial): MACNAIR TRAVEL AGENCY
Mailing Address: 1101 KING STREET
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: TRAVEL: TRANSACTION FEE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 29 / 2014
Transaction ID : SB21B.9388
Amount of Each Disbursement this Period: 35.00

SUBTOTAL of Disbursements This Page (optional) ▶ 105.00

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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 29 / 2014

Transaction ID : SB21B.9389

Amount of Each Disbursement this Period: 35.00

B. Full Name (Last, First, Middle Initial)
MACNAIR TRAVEL AGENCY

Mailing Address 1101 KING STREET

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRAVEL: TRANSACTION FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 29 / 2014

Transaction ID : SB21B.9390

Amount of Each Disbursement this Period: 35.00

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

Mailing Address 800 WEST MADISON STREET

City: CHICAGO State: IL Zip Code: 60607

Purpose of Disbursement: BANK FEES

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 22 / 2014

Transaction ID : SB21B.9464

Amount of Each Disbursement this Period: 1087.99

SUBTOTAL of Disbursements This Page (optional) ▶ 1157.99

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): MB FINANCIAL
Mailing Address: 800 WEST MADISON STREET
City: CHICAGO State: IL Zip Code: 60607
Purpose of Disbursement: BANK FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 19 / 2014
Transaction ID : SB21B.9463
Amount of Each Disbursement this Period: 1805.48

B. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9488
Amount of Each Disbursement this Period: 1.06

C. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 21 / 2014
Transaction ID : SB21B.9486
Amount of Each Disbursement this Period: 2.12

SUBTOTAL of Disbursements This Page (optional) ▶ 1808.66

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 21 / 2014
Transaction ID : SB21B.9487
Amount of Each Disbursement this Period: 2.13

B. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 22 / 2014
Transaction ID : SB21B.9485
Amount of Each Disbursement this Period: 1.06

C. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 24 / 2014
Transaction ID : SB21B.9484
Amount of Each Disbursement this Period: 6.37

SUBTOTAL of Disbursements This Page (optional) ▶ 9.56

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 28 / 2014
Transaction ID : SB21B.9482
Amount of Each Disbursement this Period: 4.68

B. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 28 / 2014
Transaction ID : SB21B.9483
Amount of Each Disbursement this Period: 42.60

C. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 29 / 2014
Transaction ID : SB21B.9481
Amount of Each Disbursement this Period: 21.25

SUBTOTAL of Disbursements This Page (optional) ▶ 68.53

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB21B.9480
Amount of Each Disbursement this Period: 35.15

B. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 05 / 2014
Transaction ID : SB21B.9479
Amount of Each Disbursement this Period: 4.25

C. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 06 / 2014
Transaction ID : SB21B.9478
Amount of Each Disbursement this Period: 3.40

SUBTOTAL of Disbursements This Page (optional) ▶ 42.80

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 07 / 2014
Transaction ID : SB21B.9477
Amount of Each Disbursement this Period: 21.25

B. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 13 / 2014
Transaction ID : SB21B.9476
Amount of Each Disbursement this Period: 13.81

C. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB21B.9475
Amount of Each Disbursement this Period: 2.98

SUBTOTAL of Disbursements This Page (optional) ▶ 38.04

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 18 / 2014
Transaction ID : SB21B.9474
Amount of Each Disbursement this Period: 1.06

B. Full Name (Last, First, Middle Initial): PIRYX
Mailing Address: 144 2ND STREET, 1ST FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 19 / 2014
Transaction ID : SB21B.9473
Amount of Each Disbursement this Period: 1.06

C. Full Name (Last, First, Middle Initial): REVOLVIS CONSULTING, INC.
Mailing Address: 400 FIRST STREET, SE, SUITE 200
City: WASHINGTON State: DC Zip Code: 20003
Purpose of Disbursement: DIRECT MAIL PRINTING & POSTAGE - DEBT PAYMENT
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9545
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5002.12

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): SOUTHWEST AIRLINES
Mailing Address: PO BOX 36647-1CF
City: DALLAS State: TX Zip Code: 75235
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB21B.9500
Amount of Each Disbursement this Period: 369.20

B. Full Name (Last, First, Middle Initial): SOUTHWEST AIRLINES
Mailing Address: PO BOX 36647-1CF
City: DALLAS State: TX Zip Code: 75235
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB21B.9501
Amount of Each Disbursement this Period: 728.40

C. Full Name (Last, First, Middle Initial): SQUARE
Mailing Address: 1455 MARKET STREET
City: SAN FRANCISCO State: CA Zip Code: 94103
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9506
Amount of Each Disbursement this Period: 40.70

SUBTOTAL of Disbursements This Page (optional) ▶ 1138.30

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): SQUARE
Mailing Address: 1455 MARKET STREET
City: SAN FRANCISCO State: CA Zip Code: 94103
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 22 / 2014
Transaction ID : SB21B.9505
Amount of Each Disbursement this Period: 72.12

B. Full Name (Last, First, Middle Initial): SQUARE
Mailing Address: 1455 MARKET STREET
City: SAN FRANCISCO State: CA Zip Code: 94103
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 23 / 2014
Transaction ID : SB21B.9504
Amount of Each Disbursement this Period: 1518.67

C. Full Name (Last, First, Middle Initial): SQUARE
Mailing Address: 1455 MARKET STREET
City: SAN FRANCISCO State: CA Zip Code: 94103
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2014
Transaction ID : SB21B.9503
Amount of Each Disbursement this Period: 17.56

SUBTOTAL of Disbursements This Page (optional) ▶ 1608.35

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): SQUARE
Mailing Address: 1455 MARKET STREET
City: SAN FRANCISCO State: CA Zip Code: 94103
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 19 / 2014
Transaction ID : SB21B.9502
Amount of Each Disbursement this Period: 0.85

B. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 17 / 2014
Transaction ID : SB21B.9526
Amount of Each Disbursement this Period: 226.20

C. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 17 / 2014
Transaction ID : SB21B.9527
Amount of Each Disbursement this Period: 226.20

SUBTOTAL of Disbursements This Page (optional) ▶ 453.25

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 17 / Y Y Y Y 2014
Transaction ID : SB21B.9528
Amount of Each Disbursement this Period: 226.20

B. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 17 / Y Y Y Y 2014
Transaction ID : SB21B.9529
Amount of Each Disbursement this Period: 226.20

C. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 17 / Y Y Y Y 2014
Transaction ID : SB21B.9530
Amount of Each Disbursement this Period: 226.20

SUBTOTAL of Disbursements This Page (optional) ▶ 678.60

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 17 / Y Y Y Y 2014
Transaction ID : SB21B.9531
Amount of Each Disbursement this Period: 226.20

B. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 17 / Y Y Y Y 2014
Transaction ID : SB21B.9532
Amount of Each Disbursement this Period: 226.20

C. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 10 / D D 17 / Y Y Y Y 2014
Transaction ID : SB21B.9533
Amount of Each Disbursement this Period: 226.20

SUBTOTAL of Disbursements This Page (optional) ▶ 678.60

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9516
Amount of Each Disbursement this Period: 285.10

B. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9517
Amount of Each Disbursement this Period: 389.20

C. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9518
Amount of Each Disbursement this Period: 398.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1072.50

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

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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9519
Amount of Each Disbursement this Period: 398.20

B. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9520
Amount of Each Disbursement this Period: 398.20

C. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9521
Amount of Each Disbursement this Period: 398.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1194.60

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9522
Amount of Each Disbursement this Period: 398.20

B. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9523
Amount of Each Disbursement this Period: 398.20

C. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9524
Amount of Each Disbursement this Period: 460.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1256.60

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB21B.9525
Amount of Each Disbursement this Period: 634.20

B. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 29 / 2014
Transaction ID : SB21B.9512
Amount of Each Disbursement this Period: 634.20

C. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 29 / 2014
Transaction ID : SB21B.9513
Amount of Each Disbursement this Period: 634.20

SUBTOTAL of Disbursements This Page (optional) ▶ 1902.60

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)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 29 / 2014
Transaction ID : SB21B.9514
Amount of Each Disbursement this Period: 634.20

B. Full Name (Last, First, Middle Initial): UNITED AIRLINES
Mailing Address: PO BOX 66100
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: TRAVEL: AIR
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 29 / 2014
Transaction ID : SB21B.9515
Amount of Each Disbursement this Period: 634.20

C. Full Name (Last, First, Middle Initial): VOLUNTEERS FOR SHIMKUS
Mailing Address: PO BOX 661
City: COLLINSVILLE State: IL Zip Code: 62234
Purpose of Disbursement: TRAVEL STIPEND GIFT CARDS
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 29 / 2014
Transaction ID : SB21B.9869
Amount of Each Disbursement this Period: 12160.00

SUBTOTAL of Disbursements This Page (optional) ▶ 13428.40

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A.
Full Name (Last, First, Middle Initial): VOLUNTEERS FOR SHIMKUS
Mailing Address: PO BOX 661
City: COLLINSVILLE State: IL Zip Code: 62234
Purpose of Disbursement: EVENT RENTAL/CATERING SERVICES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 11 / D D 04 / Y Y Y Y 2014
Transaction ID : SB21B.9871
Amount of Each Disbursement this Period: 1205.15

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 1205.15

TOTAL This Period (last page this line number only) ▶ 110350.72

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): MIKE BOST FOR CONGRESS
Mailing Address: PO BOX 1212
City: MURPHYSBORO State: IL Zip Code: 62977
Purpose of Disbursement: CONTRIBUTION
Candidate Name: MICHAEL J BOST
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 12
Disbursement For: 2014 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 10 / 21 / 2014
Transaction ID : SB23.9467
Amount of Each Disbursement this Period: 2561.15

B. Full Name (Last, First, Middle Initial): MIKE BOST FOR CONGRESS
Mailing Address: PO BOX 1212
City: MURPHYSBORO State: IL Zip Code: 62977
Purpose of Disbursement: CONTRIBUTION: GENERAL DEBT RETIREMENT
Candidate Name: MICHAEL J BOST
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 12
Disbursement For: 2014 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 11 / 12 / 2014
Transaction ID : SB23.9466
Amount of Each Disbursement this Period: 2438.85

C. Full Name (Last, First, Middle Initial): MIKE BOST FOR CONGRESS
Mailing Address: PO BOX 1212
City: MURPHYSBORO State: IL Zip Code: 62977
Purpose of Disbursement: CONTRIBUTION
Candidate Name: MICHAEL J BOST
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 12
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 12 / 2014
Transaction ID : SB23.9541
Amount of Each Disbursement this Period: 2561.15

SUBTOTAL of Disbursements This Page (optional) ▶ 7561.15

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF LOUISIANA

Mailing Address C/O RED CURVE SOLUTIONS
500 CUMMINGS CENTER, SUITE 4400

City: BEVERLY State: MA Zip Code: 01915

Purpose of Disbursement
IN-KIND: TRAVEL: AIR - SEE TRANS ID'S SB21B.9286 - SB21B.9293

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Runoff

Date of Disbursement: 11 / 03 / 2014

Transaction ID : SB23.9927

Amount of Each Disbursement this Period: 2721.15

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF LOUISIANA

Mailing Address C/O RED CURVE SOLUTIONS
500 CUMMINGS CENTER, SUITE 4400

City: BEVERLY State: MA Zip Code: 01915

Purpose of Disbursement
IN-KIND: PAYROLL - SEE TRANS ID'S SB30B.9268, 9284, 9283, 9229, 9218, 9304, 9306, 9377, & SB30B.9492

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Runoff

Date of Disbursement: 11 / 19 / 2014

Transaction ID : SB23.9937

Amount of Each Disbursement this Period: 4167.22

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SENGER FOR CONGRESS

Mailing Address 55 W MONROE

City: CHICAGO State: IL Zip Code: 60603

Purpose of Disbursement
CONTRIBUTION: EXCESS TO BE REFUNDED

Candidate Name
DARLENE SENGER

Category/Type

Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 11

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement: 10 / 29 / 2014

Transaction ID : SB23.9495

Amount of Each Disbursement this Period: 15000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 15000.00

TOTAL This Period (last page this line number only) ▶ 22561.15

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): ADVANTAGE PAYROLL SERVICES
Mailing Address: 1000 EAST WARRENVILLE RD #200
City: NAPERVILLE State: IL Zip Code: 60563
Purpose of Disbursement: PAYROLL TAXES & FEES
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9224
Amount of Each Disbursement this Period: 8598.13

B. Full Name (Last, First, Middle Initial): ADVANTAGE PAYROLL SERVICES
Mailing Address: 1000 EAST WARRENVILLE RD #200
City: NAPERVILLE State: IL Zip Code: 60563
Purpose of Disbursement: PAYROLL TAXES & FEES
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9223
Amount of Each Disbursement this Period: 8063.64

C. Full Name (Last, First, Middle Initial): ADVANTAGE PAYROLL SERVICES
Mailing Address: 1000 EAST WARRENVILLE RD #200
City: NAPERVILLE State: IL Zip Code: 60563
Purpose of Disbursement: PAYROLL TAXES & FEES
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 19 / 2014
Transaction ID : SB30B.9221
Amount of Each Disbursement this Period: 2.00

SUBTOTAL of Disbursements This Page (optional) ▶ 16663.77

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
ADVANTAGE PAYROLL SERVICES

Mailing Address 1000 EAST WARRENVILLE RD
#200

City: NAPERVILLE State: IL Zip Code: 60563

Purpose of Disbursement: PAYROLL TAXES & FEES

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 11 / 19 / 2014

Transaction ID : SB30B.9222

Amount of Each Disbursement this Period: 263.57

B. Full Name (Last, First, Middle Initial)
ADVANTAGE PAYROLL SERVICES

Mailing Address 1000 EAST WARRENVILLE RD
#200

City: NAPERVILLE State: IL Zip Code: 60563

Purpose of Disbursement: PAYROLL TAXES & FEES

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 11 / 24 / 2014

Transaction ID : SB30B.9220

Amount of Each Disbursement this Period: 85.64

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

Mailing Address 55 W MONROE
STE 940

City: CHICAGO State: IL Zip Code: 60603

Purpose of Disbursement: PAYROLL

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 10 / 30 / 2014

Transaction ID : SB30B.9490

Amount of Each Disbursement this Period: 937.35

SUBTOTAL of Disbursements This Page (optional) ▶ 1286.56

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): RICHARD BOSSERT
Mailing Address: 55 W MONROE, STE 940
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9489
Amount of Each Disbursement this Period: 937.34

B. Full Name (Last, First, Middle Initial): CANDIDATE COMMAND, LLC
Mailing Address: 1420 NW VISION, STE. 113
City: KANSAS CITY State: MO Zip Code: 64118
Purpose of Disbursement: DIRECT MAIL: PRINTING & POSTAGE
Candidate Name: DARLENE SENGER
Category/Type:
Office Sought: [X] House / Senate / President
State: IL District: 11
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 22 / 2014
Transaction ID : SB30B.9276
Amount of Each Disbursement this Period: 10152.00

C. Full Name (Last, First, Middle Initial): CANDIDATE COMMAND, LLC
Mailing Address: 1420 NW VISION, STE. 113
City: KANSAS CITY State: MO Zip Code: 64118
Purpose of Disbursement: DIRECT MAIL: PRINTING & POSTAGE
Candidate Name: DARLENE SENGER
Category/Type:
Office Sought: [X] House / Senate / President
State: IL District: 11
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 28 / 2014
Transaction ID : SB30B.9274
Amount of Each Disbursement this Period: 11000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 22089.34

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
CANDIDATE COMMAND, LLC

Mailing Address 1420 NW VISION
STE. 113

City: KANSAS CITY State: MO Zip Code: 64118

Purpose of Disbursement: DIRECT MAIL: PRINTING & POSTAGE

Candidate Name: DARLENE SENGER

Category/Type

Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 11

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 28 / 2014

Transaction ID : SB30B.9275

Amount of Each Disbursement this Period: 21650.00

B. Full Name (Last, First, Middle Initial)
CANDIDATE COMMAND, LLC

Mailing Address 1420 NW VISION
STE. 113

City: KANSAS CITY State: MO Zip Code: 64118

Purpose of Disbursement: DIRECT MAIL: PRINTING & POSTAGE

Candidate Name: RANDY HULTGREN

Category/Type

Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 14

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 29 / 2014

Transaction ID : SB30B.9273

Amount of Each Disbursement this Period: 23220.00

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

Mailing Address 308 S MAIN ST
APT 10

City: EDWARDSVILLE State: IL Zip Code: 62025

Purpose of Disbursement: PAYROLL

Candidate Name:

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 30 / 2014

Transaction ID : SB30B.9269

Amount of Each Disbursement this Period: 1389.07

SUBTOTAL of Disbursements This Page (optional) ▶ 46259.07

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): ANDREW COLLINS
Mailing Address: 308 S MAIN ST, APT 10
City: EDWARDSVILLE State: IL Zip Code: 62025
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9267
Amount of Each Disbursement this Period: 694.54

B. Full Name (Last, First, Middle Initial): ANDREW COLLINS
Mailing Address: 308 S MAIN ST, APT 10
City: EDWARDSVILLE State: IL Zip Code: 62025
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9268
Amount of Each Disbursement this Period: 694.53

C. Full Name (Last, First, Middle Initial): ANDREW COLLINS
Mailing Address: 308 S MAIN ST, APT 10
City: EDWARDSVILLE State: IL Zip Code: 62025
Purpose of Disbursement: TRAVEL: MILEAGE
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 18 / 2014
Transaction ID : SB30B.9266
Amount of Each Disbursement this Period: 411.04

SUBTOTAL of Disbursements This Page (optional) ▶ 1800.11

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): PETER COLLINS
Mailing Address: 3200 BARBARA DRIVE
City: GLENVIEW State: IL Zip Code: 60026
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9472
Amount of Each Disbursement this Period: 1147.34

B. Full Name (Last, First, Middle Initial): PETER COLLINS
Mailing Address: 3200 BARBARA DRIVE
City: GLENVIEW State: IL Zip Code: 60026
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9471
Amount of Each Disbursement this Period: 1147.34

C. Full Name (Last, First, Middle Initial): CURTIS SCOTT ADVERTISING, INC.
Mailing Address: 1550 SPRING RD STE 220
City: OAK BROOK State: IL Zip Code: 60523
Purpose of Disbursement: DIRECT MAIL: PRINTING & POSTAGE: GET OUT THE VOTE
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 31 / 2014
Transaction ID : SB30B.9282
Amount of Each Disbursement this Period: 13543.00

SUBTOTAL of Disbursements This Page (optional) ▶ 15837.68

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
DIRECT MAIL SYSTEMS

Mailing Address 12450 AUTOMOBILE BLVD.

City: CLEARWATER State: FL Zip Code: 33762

Purpose of Disbursement: DIRECT MAIL: PRINTING & POSTAGE - DEBT PAYMENT

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 10 / 20 / 2014

Transaction ID : SB30B.9553

Amount of Each Disbursement this Period: 6420.00

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

Mailing Address 12 KIMBERLY CIRCLE

City: OAK BROOK State: IL Zip Code: 60523

Purpose of Disbursement: PAYROLL

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 11 / 14 / 2014

Transaction ID : SB30B.9284

Amount of Each Disbursement this Period: 468.67

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

Mailing Address 12 KIMBERLY CIRCLE

City: OAK BROOK State: IL Zip Code: 60523

Purpose of Disbursement: PAYROLL

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 11 / 19 / 2014

Transaction ID : SB30B.9283

Amount of Each Disbursement this Period: 267.20

SUBTOTAL of Disbursements This Page (optional) ▶ 7155.87

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): MATTHEW GROSS
Mailing Address: 400 N OAKLAND AVE, APT 34
City: CARBONDALE State: IL Zip Code: 62901
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9461
Amount of Each Disbursement this Period: 1284.97

B. Full Name (Last, First, Middle Initial): MATTHEW GROSS
Mailing Address: 400 N OAKLAND AVE, APT 34
City: CARBONDALE State: IL Zip Code: 62901
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9460
Amount of Each Disbursement this Period: 1046.21

C. Full Name (Last, First, Middle Initial): ALEXANDER HENDERSON
Mailing Address: 55 W MONROE, STE 940
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9230
Amount of Each Disbursement this Period: 937.34

SUBTOTAL of Disbursements This Page (optional) ▶ 3268.52

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): ALEXANDER HENDERSON
Mailing Address: 55 W MONROE, STE 940
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9228
Amount of Each Disbursement this Period: 468.68

B. Full Name (Last, First, Middle Initial): ALEXANDER HENDERSON
Mailing Address: 55 W MONROE, STE 940
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9229
Amount of Each Disbursement this Period: 468.67

C. Full Name (Last, First, Middle Initial): KAP STRATEGIES
Mailing Address: 229 EVANS LN
City: ALEXANDRIA State: VA Zip Code: 22305
Purpose of Disbursement: DIRECT MAIL PRINTING
Candidate Name: MICHAEL J BOST
Category/Type:
Office Sought: [X] House / Senate / President
State: IL District: 12
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 17 / 2014
Transaction ID : SB30B.9384
Amount of Each Disbursement this Period: 44210.52

SUBTOTAL of Disbursements This Page (optional) ▶ 45147.87

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): KAP STRATEGIES
Mailing Address: 229 EVANS LN
City: ALEXANDRIA State: VA Zip Code: 22305
Purpose of Disbursement: DIRECT MAIL PRINTING
Candidate Name: MICHAEL J BOST
Category/Type:
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 12
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 22 / 2014
Transaction ID : SB30B.9383
Amount of Each Disbursement this Period: 46289.39

B. Full Name (Last, First, Middle Initial): KAP STRATEGIES
Mailing Address: 229 EVANS LN
City: ALEXANDRIA State: VA Zip Code: 22305
Purpose of Disbursement: DIRECT MAIL PRINTING
Candidate Name: MICHAEL J BOST
Category/Type:
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 12
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 29 / 2014
Transaction ID : SB30B.9382
Amount of Each Disbursement this Period: 22562.00

C. Full Name (Last, First, Middle Initial): KAITLIN KINSER
Mailing Address: 55 W MONROE SUITE 940
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9381
Amount of Each Disbursement this Period: 937.35

SUBTOTAL of Disbursements This Page (optional) ▶ 69788.74

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): KAITLIN KINSER
Mailing Address: 55 W MONROE, SUITE 940
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9380
Amount of Each Disbursement this Period: 937.34

B. Full Name (Last, First, Middle Initial): SAMUEL J LAWRENCE
Mailing Address: 102 N MCCULLOUGH ST, STE 940
City: URBANA State: IL Zip Code: 61801
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9493
Amount of Each Disbursement this Period: 1287.22

C. Full Name (Last, First, Middle Initial): SAMUEL J LAWRENCE
Mailing Address: 102 N MCCULLOUGH ST, STE 940
City: URBANA State: IL Zip Code: 61801
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9491
Amount of Each Disbursement this Period: 643.61

SUBTOTAL of Disbursements This Page (optional) ▶ 2868.17

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): SAMUEL J LAWRENCE
Mailing Address: 102 N MCCULLOUGH ST STE 940
City: URBANA State: IL Zip Code: 61801
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9492
Amount of Each Disbursement this Period: 643.60

B. Full Name (Last, First, Middle Initial): ABRAHAM LEVY
Mailing Address: 901 GETTYSBURG DR APT4
City: BOURBONNAIS State: IL Zip Code: 60914
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9219
Amount of Each Disbursement this Period: 299.43

C. Full Name (Last, First, Middle Initial): ABRAHAM LEVY
Mailing Address: 901 GETTYSBURG DR APT4
City: BOURBONNAIS State: IL Zip Code: 60914
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9217
Amount of Each Disbursement this Period: 149.72

SUBTOTAL of Disbursements This Page (optional) ▶ 1092.75

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): ABRAHAM LEVY
Mailing Address: 901 GETTYSBURG DR APT4
City: BOURBONNAIS State: IL Zip Code: 60914
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9218
Amount of Each Disbursement this Period: 149.72

B. Full Name (Last, First, Middle Initial): MAJORITY STRATEGIES, INC.
Mailing Address: 135 PROFESSIONAL DRIVE, SUITE 104
City: PONTE VEDRA BEACH State: FL Zip Code: 32082
Purpose of Disbursement: DIRECT MAIL PRINTING & POSTAGE
Candidate Name: ROBERT JAMES JR DOLD
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 10
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 16 / 2014
Transaction ID : SB30B.9459
Amount of Each Disbursement this Period: 21677.64

C. Full Name (Last, First, Middle Initial): MAJORITY STRATEGIES, INC.
Mailing Address: 135 PROFESSIONAL DRIVE, SUITE 104
City: PONTE VEDRA BEACH State: FL Zip Code: 32082
Purpose of Disbursement: DIRECT MAIL PRINTING & POSTAGE
Candidate Name: ROBERT JAMES JR DOLD
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 10
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB30B.9458
Amount of Each Disbursement this Period: 20406.77

SUBTOTAL of Disbursements This Page (optional) ▶ 42234.13

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): MAJORITY STRATEGIES, INC.
Mailing Address: 135 PROFESSIONAL DRIVE, SUITE 104
City: PONTE VEDRA BEACH State: FL Zip Code: 32082
Purpose of Disbursement: DIRECT MAIL PRINTING & POSTAGE
Candidate Name: ROBERT JAMES JR DOLD
Category/Type:
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 10
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 22 / 2014
Transaction ID : SB30B.9457
Amount of Each Disbursement this Period: 20406.77

B. Full Name (Last, First, Middle Initial): MAJORITY STRATEGIES, INC.
Mailing Address: 135 PROFESSIONAL DRIVE, SUITE 104
City: PONTE VEDRA BEACH State: FL Zip Code: 32082
Purpose of Disbursement: DIRECT MAIL PRINTING & POSTAGE
Candidate Name: ROBERT JAMES JR DOLD
Category/Type:
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 10
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 27 / 2014
Transaction ID : SB30B.9456
Amount of Each Disbursement this Period: 16889.36

C. Full Name (Last, First, Middle Initial): MAJORITY STRATEGIES, INC.
Mailing Address: 135 PROFESSIONAL DRIVE, SUITE 104
City: PONTE VEDRA BEACH State: FL Zip Code: 32082
Purpose of Disbursement: DIRECT MAIL PRINTING & POSTAGE
Candidate Name: ROBERT JAMES JR DOLD
Category/Type:
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 10
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 28 / 2014
Transaction ID : SB30B.9455
Amount of Each Disbursement this Period: 38934.26

SUBTOTAL of Disbursements This Page (optional) ▶ 76230.39

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): JAYME ODOM
Mailing Address: 1401 S STATE ST APT 2111
City: CHICAGO State: IL Zip Code: 60605
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9375
Amount of Each Disbursement this Period: 2615.58

B. Full Name (Last, First, Middle Initial): JAYME ODOM
Mailing Address: 1401 S STATE ST APT 2111
City: CHICAGO State: IL Zip Code: 60605
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9374
Amount of Each Disbursement this Period: 2615.58

C. Full Name (Last, First, Middle Initial): EMILY OTT
Mailing Address: 1413 CASTLETON RD
City: LIBERTYVILLE State: IL Zip Code: 60048
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9308
Amount of Each Disbursement this Period: 937.34

SUBTOTAL of Disbursements This Page (optional) ▶ 6168.50

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): EMILY OTT
Mailing Address: 1413 CASTLETON RD
City: LIBERTYVILLE State: IL Zip Code: 60048
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9306
Amount of Each Disbursement this Period: 468.67

B. Full Name (Last, First, Middle Initial): EMILY OTT
Mailing Address: 1413 CASTLETON RD
City: LIBERTYVILLE State: IL Zip Code: 60048
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9307
Amount of Each Disbursement this Period: 468.68

C. Full Name (Last, First, Middle Initial): PERSUASION PARTNERS INC.
Mailing Address: 106 E DOTY ST STE 300
City: MADISON State: WI Zip Code: 53703
Purpose of Disbursement: DIRECT MAIL PRINTING
Candidate Name: MICHAEL J BOST
Category/Type:
Office Sought: [X] House / Senate / President
State: IL District: 12
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 24 / 2014
Transaction ID : SB30B.9470
Amount of Each Disbursement this Period: 4695.60

SUBTOTAL of Disbursements This Page (optional) ▶ 5632.95

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): PERSUASION PARTNERS INC.
Mailing Address: 106 E DOTY ST, STE 300
City: MADISON State: WI Zip Code: 53703
Purpose of Disbursement: DIRECT MAIL PRINTING
Candidate Name: MICHAEL J BOST
Category/Type:
Office Sought: [X] House [ ] Senate [ ] President
State: IL District: 12
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 27 / 2014
Transaction ID : SB30B.9469
Amount of Each Disbursement this Period: 10413.60

B. Full Name (Last, First, Middle Initial): STEPHEN POTTER II
Mailing Address: 1920 WAUKEGAN RD, STE 210
City: GLENVIEW State: IL Zip Code: 60025
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9508
Amount of Each Disbursement this Period: 937.35

C. Full Name (Last, First, Middle Initial): STEPHEN POTTER II
Mailing Address: 1920 WAUKEGAN RD, STE 210
City: GLENVIEW State: IL Zip Code: 60025
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9507
Amount of Each Disbursement this Period: 937.34

SUBTOTAL of Disbursements This Page (optional) ▶ 12288.29

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): DUSTIN RHODES
Mailing Address: 16 MINNIE DR
City: BELLEVILLE State: IL Zip Code: 62226
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 30 / 2014
Transaction ID : SB30B.9305
Amount of Each Disbursement this Period: 937.35

B. Full Name (Last, First, Middle Initial): DUSTIN RHODES
Mailing Address: 16 MINNIE DR
City: BELLEVILLE State: IL Zip Code: 62226
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9303
Amount of Each Disbursement this Period: 468.67

C. Full Name (Last, First, Middle Initial): DUSTIN RHODES
Mailing Address: 16 MINNIE DR
City: BELLEVILLE State: IL Zip Code: 62226
Purpose of Disbursement: PAYROLL
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 14 / 2014
Transaction ID : SB30B.9304
Amount of Each Disbursement this Period: 468.67

SUBTOTAL of Disbursements This Page (optional) ▶ 1874.69

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

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

Mailing Address 208 14TH ST

City: SILVIS State: IL Zip Code: 61282

Purpose of Disbursement: PAYROLL

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 10 / 30 / 2014

Transaction ID : SB30B.9378

Amount of Each Disbursement this Period: 1074.99

B. Full Name (Last, First, Middle Initial)
JOHN T STERLING

Mailing Address 208 14TH ST

City: SILVIS State: IL Zip Code: 61282

Purpose of Disbursement: PAYROLL

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 11 / 14 / 2014

Transaction ID : SB30B.9376

Amount of Each Disbursement this Period: 537.50

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

Mailing Address 208 14TH ST

City: SILVIS State: IL Zip Code: 61282

Purpose of Disbursement: PAYROLL

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 11 / 14 / 2014

Transaction ID : SB30B.9377

Amount of Each Disbursement this Period: 537.49

SUBTOTAL of Disbursements This Page (optional) ▶ 2149.98

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
TARGETED CREATIVE COMMUNICATIONS, INC.

Mailing Address 106 S. COLUMBUS ST

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: DIRECT MAIL PRINTING

Candidate Name: RODNEY L DAVIS

Category/Type

Office Sought: [X] House [ ] Senate [ ] President

State: IL District: 13

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 22 / 2014

Transaction ID : SB30B.9511

Amount of Each Disbursement this Period: 18287.05

B. Full Name (Last, First, Middle Initial)
TARGETED CREATIVE COMMUNICATIONS, INC.

Mailing Address 106 S. COLUMBUS ST

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: DIRECT MAIL PRINTING

Candidate Name: RODNEY L DAVIS

Category/Type

Office Sought: [X] House [ ] Senate [ ] President

State: IL District: 13

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 28 / 2014

Transaction ID : SB30B.9510

Amount of Each Disbursement this Period: 18287.05

C. Full Name (Last, First, Middle Initial)
TARGETED CREATIVE COMMUNICATIONS, INC.

Mailing Address 106 S. COLUMBUS ST

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: DIRECT MAIL PRINTING

Candidate Name: RODNEY L DAVIS

Category/Type

Office Sought: [X] House [ ] Senate [ ] President

State: IL District: 13

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 30 / 2014

Transaction ID : SB30B.9509

Amount of Each Disbursement this Period: 15361.86

SUBTOTAL of Disbursements This Page (optional) ▶ 51935.96

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial): VICTORY PHONES
Mailing Address: 190 MONROE AVE. NW, FIFTH FLOOR
City: GRAND RAPIDS State: MI Zip Code: 49503
Purpose of Disbursement: TELEMARKETING & DATA MANAGEMENT SERVICES: PHONE SYSTEMS
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 20 / 2014
Transaction ID : SB30B.9535
Amount of Each Disbursement this Period: 4997.00

B. Full Name (Last, First, Middle Initial): VICTORY PHONES
Mailing Address: 190 MONROE AVE. NW, FIFTH FLOOR
City: GRAND RAPIDS State: MI Zip Code: 49503
Purpose of Disbursement: TELEMARKETING & DATA MANAGEMENT SERVICES
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 11 / 07 / 2014
Transaction ID : SB30B.9534
Amount of Each Disbursement this Period: 4041.69

C. Full Name (Last, First, Middle Initial): WAYNE PRINTING
Mailing Address: 5901 N PROSPECT RD, PO BOX 10555
City: PEORIA State: IL Zip Code: 61612
Purpose of Disbursement: DIRECT MAIL PRINTING & POSTAGE
Candidate Name: AARON JON MR. SCHOCK
Category/Type:
Office Sought: [X] House / Senate / President
State: IL District: 18
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 17 / 2014
Transaction ID : SB30B.9537
Amount of Each Disbursement this Period: 31843.84

SUBTOTAL of Disbursements This Page (optional) ▶ 40882.53

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)
21b 22 23 24 25 26
27 28a 28b 28c 29 [X] 30b

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial)
ANDREW WELHOUSE

Mailing Address 303 S. HALSTED STREET
APT. 2

City: CHICAGO State: IL Zip Code: 60661

Purpose of Disbursement: PAYROLL

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 10 / 30 / 2014

Transaction ID : SB30B.9271

Amount of Each Disbursement this Period: 2260.08

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

Mailing Address 303 S. HALSTED STREET
APT. 2

City: CHICAGO State: IL Zip Code: 60661

Purpose of Disbursement: PAYROLL

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 11 / 14 / 2014

Transaction ID : SB30B.9270

Amount of Each Disbursement this Period: 2260.09

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

Mailing Address 55 W MONROE
STE 940

City: CHICAGO State: IL Zip Code: 60603

Purpose of Disbursement: PAYROLL

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 10 / 30 / 2014

Transaction ID : SB30B.9379

Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7020.17

TOTAL This Period (last page this line number only) ▶ 479676.04

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)
- [ ] 9
- [x] 10

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AIRNET GROUP, INC.

Mailing Address 801 BROAD STREET

City: CHATTANOOGA State: TN Zip Code: 37402

Nature of Debt (Purpose): VOLUNTEER PHONE MINUTES

Transaction ID : SD10.4202

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
46681.51	0.00	3500.00	43181.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DIRECT MAIL SYSTEMS

Mailing Address 12450 AUTOMOBILE BLVD.

City: CLEARWATER State: FL Zip Code: 33762

Nature of Debt (Purpose): DIRECT MAIL: PRINTING AND POSTAGE

Transaction ID : SD10.4199

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
6420.15	0.00	6420.00	0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD., N

City: SAINT PAUL State: MN Zip Code: 55128

Nature of Debt (Purpose): TELEMARKETING

Transaction ID : SD10.4210

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
43348.00	0.00	0.00	43348.00

1) **SUBTOTALS** This Period This Page (optional) ▶	86529.51
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)

FOR LINE NUMBER: (check only one)
- [ ] 9
- [x] 10

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MAILFINANCE, NEOPOST USA

Mailing Address 1335 VALWOOD PARKWAY, STE. 111

City: CARROLLTON State: TX Zip Code: 75006

Nature of Debt (Purpose): POSTAGE SYSTEM

Transaction ID : SD10.4223

Outstanding Balance Beginning This Period: 5388.24

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 5388.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
REVOLVIS CONSULTING, INC.

Mailing Address 400 FIRST STREET, SE
SUITE 200

City: WASHINGTON State: DC Zip Code: 20003

Nature of Debt (Purpose): DIRECT MAIL: PRINTING AND POSTAGE

Transaction ID : SD10.4213

Outstanding Balance Beginning This Period: 41451.95

Amount Incurred This Period: 0.00

Payment This Period: 5000.00

Outstanding Balance at Close of This Period: 36451.95

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TARGETED CREATIVE COMMUNICATIONS, INC.

Mailing Address 106 S. COLUMBUS ST

City: ALEXANDRIA State: VA Zip Code: 22314

Nature of Debt (Purpose): DIRECT MAIL: PRINTING AND POSTAGE

Transaction ID : SD10.4204

Outstanding Balance Beginning This Period: 39000.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 39000.00

1) **SUBTOTALS** This Period This Page (optional) ▶	80840.19
2) **TOTALS** This Period (last page this line number only) ▶	167369.70
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) ▶	167369.70

Image# 15950146560

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE (2 U.S.C. §441a(d))

(To be used only by Political Committees in the General Election)

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Has your committee been designated to make coordinated expenditures by a political party committee?
☐ YES ☒ NO
If YES, name the designating committee:

Full Name of Subordinate Committee

Mailing Address

City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee: MEGAN KIRIK
Mailing Address: 3419 49TH ST
City: MOLINE State: IL Zip Code: 61265
Name of Federal Candidate Supported: ROBERT T. SCHILLING
Office Sought: ☒ House ☐ Senate ☐ Presidential State: IL District: 17
Aggregate General Election Expenditure for this Candidate ▶ 2000.00
Transaction ID : SF.9945

Purpose of Expenditure: FIELD CONSULTING
Category/Type:
Date: 11 / 01 / 2014
Amount: 2000.00

Full Name (Last, First, Middle Initial) of Each Payee: STEVEN SHEARER
Mailing Address: 1600 W BLUE SAGE DR
City: PEORIA State: IL Zip Code: 61615
Name of Federal Candidate Supported: ROBERT T. SCHILLING
Office Sought: ☒ House ☐ Senate ☐ Presidential State: IL District: 17
Aggregate General Election Expenditure for this Candidate ▶ 11000.00
Transaction ID : SF.9548

Purpose of Expenditure: STRATEGY CONSULTING
Category/Type:
Date: 11 / 01 / 2014
Amount: 11000.00

Full Name (Last, First, Middle Initial) of Each Payee: VICTORY PHONES
Mailing Address: 190 MONROE AVE. NW FIFTH FLOOR
City: GRAND RAPIDS State: MI Zip Code: 49503
Name of Federal Candidate Supported: DARLENE SENGER
Office Sought: ☒ House ☐ Senate ☐ Presidential State: IL District: 11
Aggregate General Election Expenditure for this Candidate ▶ 1985.04
Transaction ID : SF.9948

Purpose of Expenditure: TELEMARKETING & DATA MANAGEMENT SERVICES
Category/Type:
Date: 11 / 07 / 2014
Amount: 258.31

SUBTOTAL of Expenditures This Page (optional) ▶ 13258.31

TOTAL This Period (last page this line number only) ▶ 13258.31

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.

ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
7.11.14 Fundraising event (07/11/2014) ACTIVITY IS: [X] Fundraising [ ] Direct Candidate Support CHECK IF THE RATIO IS: [ ] New [ ] Revised [X] Same as Previously Reported **Transaction ID : H2.9547**	86.00 %	14.00 %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: [ ] Fundraising [ ] Direct Candidate Support CHECK IF THE RATIO IS: [ ] New [ ] Revised [ ] Same as Previously Reported	%	%
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: [ ] Fundraising [ ] Direct Candidate Support CHECK IF THE RATIO IS: [ ] New [ ] Revised [ ] Same as Previously Reported	%	%
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: [ ] Fundraising [ ] Direct Candidate Support CHECK IF THE RATIO IS: [ ] New [ ] Revised [ ] Same as Previously Reported	%	%
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: [ ] Fundraising [ ] Direct Candidate Support CHECK IF THE RATIO IS: [ ] New [ ] Revised [ ] Same as Previously Reported	%	%
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: [ ] Fundraising [ ] Direct Candidate Support CHECK IF THE RATIO IS: [ ] New [ ] Revised [ ] Same as Previously Reported	%	%

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

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
ILLINOIS REPUBLICAN PARTY	M M 10 / D D 31 / Y Y Y Y 2014	15000.00

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative** 15000.00

Transaction ID : H3.9873

ii) **Generic Voter Drive** .....

iii) **Exempt Activities** .....

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) _____

b) _____

c) Total Amount Transferred For Direct Fundraising .....

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) 15000.00

TOTAL This Period (Generic Voter Drive) 0.00

TOTAL This Period (Exempt Activities) 0.00

TOTAL This Period (Direct Fundraising) 0.00

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) 15000.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8934**
ABRAHAM LEVY
Mailing Address 901 GETTYSBURG DR
APT4
City BOURBONNAIS State IL Zip Code 60914
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 316896.32
Date 10/16/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.51		208.84		264.35

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9057**
PATRIOT TAXI
Mailing Address 536 N ELSTON AVE
City CHICAGO State IL Zip Code 60630
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 316904.97
Date 10/16/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.82		6.83		8.65

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9096**
UPS
Mailing Address 516 N. OGDEN AVE.
City CHICAGO State IL Zip Code 60642
Purpose of Disbursement: DELIVERY SERVICES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 316924.96
Date 10/16/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		15.79		19.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.53		231.46		292.99

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9097**
UPS
Mailing Address 516 N. OGDEN AVE.
City: CHICAGO State: IL Zip Code: 60642
Purpose of Disbursement: DELIVERY SERVICES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 316954.46
Date: 10 / 16 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.20		23.30		29.50

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9112**
WAL-MART
Mailing Address 2080 N ST ROUTE 50
City: BOURBONNAIS State: IL Zip Code: 60914
Purpose of Disbursement: LEVY REIMBURSEMENT 10/16: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 317056.60
Date: 10 / 16 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.45		80.69		102.14

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9114**
JEWEL OSCO
Mailing Address 2051 RIDGE RD
City: MINOOKA State: IL Zip Code: 60447
Purpose of Disbursement: LEVY REIMBURSEMENT 10/16: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 317104.82
Date: 10 / 16 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.13		38.09		48.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.20		23.30		29.50

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9116**
BUFFALO WILD WINGS
Mailing Address 1023 BROOKFOREST DR
City: SHOREWOOD State: IL Zip Code: 60404
Purpose of Disbursement:
LEVY REIMBURSEMENT 10/16: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 317126.76
Date: 10 / 16 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.61		17.33		21.94

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9117**
DUNKIN' DONUTS
Mailing Address 811 E OGDEN AVE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement:
LEVY REIMBURSEMENT 10/16: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 317197.55
Date: 10 / 16 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.87		55.92		70.79

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9119**
KFC
Mailing Address 581 BOB BLAIR RD
City: MINOOKA State: IL Zip Code: 60447
Purpose of Disbursement:
LEVY REIMBURSEMENT 10/16: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 317218.81
Date: 10 / 16 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.46		16.80		21.26

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8968**
CHRISTOPHER PIPER
Mailing Address 2303 BELMORE DR
City CHAMPAIGN State IL Zip Code 61821
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 318218.81
Date 10 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9009**
JAMES WEIR
Mailing Address 901 S 1ST ST APT 16
City CHAMPAIGN State IL Zip Code 61820
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 319218.81
Date 10 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9036**
MAXWELL WEISS
Mailing Address 110 E CHALMERS
City CHAMPAIGN State IL Zip Code 61820
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 320218.81
Date 10 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9044**
MICHAEL LAUREANO
Mailing Address 1007 S FIRST ST #8
City CHAMPAIGN State IL Zip Code 61820
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 321218.81
Date 10/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9081**
SOUTHERN DEVELOPMENT LLC
Mailing Address 300 E MAIN ST
City CARBONDALE State IL Zip Code 62901
Purpose of Disbursement: RENT
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 321968.81
Date 10/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.50		592.50		750.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8946**
BEEF AND BRANDY
Mailing Address 127 S STATE STREET
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 322034.34
Date 10/20/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.76		51.77		65.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
381.26		1434.27		1815.53

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8961**
CHI TAXI
Mailing Address 856-898 N MICHIGAN AVE
City: CHICAGO State: IL Zip Code: 60611
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 322044.39
Date: 10 / 20 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.11		7.94		10.05

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8965**
CHICAGO ELITE CAB
Mailing Address 2617 S WABASH AVE
City: CHICAGO State: IL Zip Code: 60616
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 322052.94
Date: 10 / 20 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.80		6.75		8.55

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8970**
CITY OF NAPERVILLE
Mailing Address 400 S EAGLE STREET
City: NAPERVILLE State: IL Zip Code: 60540
Purpose of Disbursement: UTILITIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 322746.43
Date: 10 / 20 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.63		547.86		693.49

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
149.54		562.55		712.09

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8975**
CURB
Mailing Address 5904 RICHMOND HWY SUITE 600
City: ALEXANDRIA State: VA Zip Code: 22303
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 322756.58
Date: 10 / 20 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.13		8.02		10.15

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9027**
LEXIS NEXIS
Mailing Address PO BOX 2314
City: CAROL STREAM State: IL Zip Code: 60132
Purpose of Disbursement: ONLINE SUBSCRIPTIONS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 323026.58
Date: 10 / 20 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.70		213.30		270.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9054**
NEW RIVER RESEARCH INSTITUTE
Mailing Address 2150 COUNTRY CLUB ROAD SUITE 221
City: WINSTON-SALEM State: NC Zip Code: 27104
Purpose of Disbursement: SOFTWARE SERVICES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 324526.58
Date: 10 / 20 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
373.83		1406.32		1780.15

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9055**
NICOR GAS
Mailing Address PO BOX 5407
City CAROL STREAM State IL Zip Code 60197
Purpose of Disbursement: RENT & UTILITIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 324553.48
Date 10/20/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.65		21.25		26.90

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9090**
THE HEARN COMPANY
Mailing Address 55 W MONROE STREET Suite 3925
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: RENT
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 328665.40
Date 10/20/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
863.50		3248.42		4111.92

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9091**
THE HEARN COMPANY
Mailing Address 55 W MONROE STREET Suite 3925
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: RENT
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 335116.83
Date 10/20/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1354.80		5096.63		6451.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2223.95		8366.30		10590.25

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9100**
USPS
Mailing Address 100 W. RANDOLPH STREET
City: CHICAGO State: IL Zip Code: 60664
Purpose of Disbursement: POSTAGE
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 335156.81
Date: 10/20/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		31.58		39.98

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9107**
WALGREENS
Mailing Address 79 W. MONROE STREET
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 335176.41
Date: 10/20/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.12		15.48		19.60

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9039**
MCDONALD'S
Mailing Address 2111 MCDONALD'S DRIVE
City: OAK BROOK State: IL Zip Code: 60523
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 335227.07
Date: 10/21/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.64		40.02		50.66

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.16		87.08		110.24

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8995**
GRUBHUB
Mailing Address 111 W WASHINGTON ST
City CHICAGO State IL Zip Code 60602
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 335264.62
Date 10/22/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.89		29.66		37.55

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9109**
WEST BEND MUTUAL INSURANCE
Mailing Address 188 W INDUSTRIAL DRIVE SUITE 430
City ELMHURST State IL Zip Code 60126
Purpose of Disbursement: LIABILITY INSURANCE
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 335739.71
Date 10/22/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.77		375.32		475.09

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9076**
SAPER LAW OFFICES LLC
Mailing Address 505 N LASALLE SUITE 350
City CHICAGO State IL Zip Code 60654
Purpose of Disbursement: LEGAL CONSULTING
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 338739.71
Date 10/24/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
737.66		2774.98		3512.64

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9095**
TRACTOR SUPPLY COMPANY
Mailing Address 5401 VIRGINIA WAY
City BRENTWOOD State TN Zip Code 37027
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 338979.09
Date 10/24/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.27		189.11		239.38

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8950**
BROWN, HAY & STEPHENS LLP
Mailing Address 205 S FIFTH ST PO BOX 2459
City SPRINGFIELD State IL Zip Code 62705
Purpose of Disbursement: LEGAL CONSULTING
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 343941.59
Date 10/27/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1042.13		3920.37		4962.50

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8971**
COMCAST
Mailing Address 1255 W NORTH AVE
City CHICAGO State IL Zip Code 60642
Purpose of Disbursement: BROADBAND SERVICES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 344145.74
Date 10/27/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.87		161.28		204.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1135.27		4270.76		5406.03

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9029**
LISA WAGNER & CO
Mailing Address PO BOX 446
City: BATAVIA State: IL Zip Code: 60510
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 344255.03
Date: 10 / 27 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.95		86.34		109.29

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9067**
RON GOULD STUDIOS
Mailing Address 1401 W HURON STREET
City: CHICAGO State: IL Zip Code: 60642
Purpose of Disbursement: PHOTOGRAPHY SERVICES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 344971.03
Date: 10 / 27 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.36		565.64		716.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9206**
OFFICE DEPOT
Mailing Address 6 S STATE ST
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: LISA WAGNER & CO REIMBURSEMENT: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 345006.72
Date: 10 / 27 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.49		28.20		35.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.31		651.98		825.29

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9208**
SYSTEM PARKING
Mailing Address 401 S WABASH
City: CHICAGO State: IL Zip Code: 60604
Purpose of Disbursement: LISA WAGNER & CO REIMBURSEMENT: PARKING
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 345046.72
Date: 10 / 27 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		31.60		40.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9210**
MEAGHAN OLSEN
Mailing Address PO BOX 446
City: BATAVIA State: IL Zip Code: 60510
Purpose of Disbursement: LISA WAGNER & CO REIMBURSEMENT: MILEAGE
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 345080.32
Date: 10 / 27 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.06		26.54		33.60

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9213**
RED CURVE SOLUTIONS
Mailing Address 138 CONANT STREET
City: BEVERLY State: MA Zip Code: 01915
Purpose of Disbursement: COMPLIANCE CONSULTING
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 347628.56
Date: 10 / 27 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
535.13		2013.11		2548.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
535.13		2013.11		2548.24

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9059**
PEAPOD
Mailing Address 84 BIESTERFIELD ROAD
City: ELK GROVE VLG State: IL Zip Code: 60007
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 347775.80
Date: 10 / 29 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.92		116.32		147.24

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8980**
DARSHAN GOPI
Mailing Address 12 KIMBERLY CIRCLE
City: OAK BROOK State: IL Zip Code: 60523
Purpose of Disbursement: PAYROLL < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 348713.15
Date: 10 / 30 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
196.84		740.51		937.35

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9022**
KENNEDY CHIGLO
Mailing Address 544 WEST SCHUBERT AVE.
City: CHICAGO State: IL Zip Code: 60614
Purpose of Disbursement: PAYROLL < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 350062.71
Date: 10 / 30 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
283.41		1066.15		1349.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
511.17		1922.98		2434.15

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9102**
VERTICALRESPONSE INC
Mailing Address 50 BEALE STREET
10TH FLOOR
City: SAN FRANCISCO State: CA Zip Code: 94105
Purpose of Disbursement: POSTAGE
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 350106.71
Date: 10/30/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.24		34.76		44.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8960**
CHI TAXI
Mailing Address 856-898 N MICHIGAN AVE
City: CHICAGO State: IL Zip Code: 60611
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 350115.96
Date: 10/31/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.94		7.31		9.25

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8964**
CHICAGO ELITE CAB
Mailing Address 2617 S WABASH AVE
City: CHICAGO State: IL Zip Code: 60616
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 350121.27
Date: 10/31/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.12		4.19		5.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.30		46.26		58.56

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8959**
CHI TAXI
Mailing Address 856-898 N MICHIGAN AVE
City: CHICAGO State: IL Zip Code: 60611
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 350128.72
Date: 11 / 03 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.56		5.89		7.45

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8973**
CURB
Mailing Address 5904 RICHMOND HWY SUITE 600
City: ALEXANDRIA State: VA Zip Code: 22303
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 350136.17
Date: 11 / 03 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.56		5.89		7.45

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8974**
CURB
Mailing Address 5904 RICHMOND HWY SUITE 600
City: ALEXANDRIA State: VA Zip Code: 22303
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 350145.42
Date: 11 / 03 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.94		7.31		9.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.06		19.09		24.15

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9002**
ITALIAN VILLAGE
Mailing Address 71 W. MONROE ST.
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 350242.39
Date: 11 / 03 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.36		76.61		96.97

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9018**
JIMMY JOHN'S GOURMET SANDWICHES
Mailing Address 6 E. MADISON STREET
City: CHICAGO State: IL Zip Code: 60604
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 350480.36
Date: 11 / 03 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.97		188.00		237.97

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9053**
NEW RIVER RESEARCH INSTITUTE
Mailing Address 2150 COUNTRY CLUB ROAD SUITE 221
City: WINSTON-SALEM State: NC Zip Code: 27104
Purpose of Disbursement: SOFTWARE SERVICES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 351980.36
Date: 11 / 03 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
385.33		1449.61		1834.94

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9098**
US BANK
Mailing Address P.O. BOX 790448
City: ST. LOUIS State: MO Zip Code: 63179
Purpose of Disbursement: EQUIPMENT RENTAL
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 352313.95
Date: 11/03/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.05		263.54		333.59

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9212**
RED CURVE SOLUTIONS
Mailing Address 138 CONANT STREET
City: BEVERLY State: MA Zip Code: 01915
Purpose of Disbursement: DELIVERY SERVICES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 352330.76
Date: 11/03/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.53		13.28		16.81

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8943**
ANDREW COLLINS
Mailing Address 308 S MAIN ST APT 10
City: EDWARDSVILLE State: IL Zip Code: 62025
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 353837.07
Date: 11/04/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
316.33		1189.98		1506.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
389.91		1466.80		1856.71

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9001**
ITALIAN VILLAGE
Mailing Address 71 W. MONROE ST.
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 353953.90
Date: 11 / 04 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.53		92.30		116.83

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9886**
TRUE VALUE
Mailing Address 1915 W MAIN MURDALE SHOPPING CTR
City: CARBONDALE State: IL Zip Code: 62901
Purpose of Disbursement: COLLINS REIMBURSEMENT: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 353953.90
Date: 11 / 04 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.20		30.85		39.05

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9887**
RED ROBIN
Mailing Address 6699 EDWARDSVILLE XING DR
City: EDWARDSVILLE State: IL Zip Code: 62025
Purpose of Disbursement: COLLINS REIMBURSEMENT: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 353953.90
Date: 11 / 04 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.78		55.60		70.38

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.53		92.30		116.83

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9888**
CHILI'S GRILL AND BAR
Mailing Address 6311 N ILLINOIS
City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208
Purpose of Disbursement: COLLINS REIMBURSEMENT: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative **[MEMO ITEM]**
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 353953.90
Date: 11 / 04 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.80		33.12		41.92

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9891**
HAWTHORN SUITES
Mailing Address 101 TRADE CENTER DR
City: CHAMPAIGN State: IL Zip Code: 61820
Purpose of Disbursement: COLLINS REIMBURSEMENT: TRAVEL: LODGING
Activity or Event Identifier: Administrative **[MEMO ITEM]**
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 353953.90
Date: 11 / 04 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.47		118.37		149.84

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9892**
ANDREW COLLINS
Mailing Address 308 S MAIN ST APT 10
City: EDWARDSVILLE State: IL Zip Code: 62025
Purpose of Disbursement: TRAVEL: MILEAGE
Activity or Event Identifier: Administrative **[MEMO ITEM]**
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 353953.90
Date: 11 / 04 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
253.08		952.04		1205.12

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8972**
CURB
Mailing Address 5904 RICHMOND HWY SUITE 600
City: ALEXANDRIA State: VA Zip Code: 22303
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 353963.55
Date: 11 / 05 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.03		7.62		9.65

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9038**
MCDONALD'S
Mailing Address 2111 MCDONALD'S DRIVE
City: OAK BROOK State: IL Zip Code: 60523
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 354016.05
Date: 11 / 05 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.03		41.47		52.50

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9073**
SAM'S CLUB
Mailing Address 2601 S CICERO AVE
City: CHICAGO State: IL Zip Code: 60804
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 354196.35
Date: 11 / 05 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.86		142.44		180.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.92		191.53		242.45

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9083**
STARBUCKS
Mailing Address 131 S DEARBORN STREET
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 354266.41
Date: 11 / 05 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.71		55.35		70.06

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8957**
CHI TAXI
Mailing Address 856-898 N MICHIGAN AVE
City: CHICAGO State: IL Zip Code: 60611
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 354276.26
Date: 11 / 06 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.07		7.78		9.85

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8958**
CHI TAXI
Mailing Address 856-898 N MICHIGAN AVE
City: CHICAGO State: IL Zip Code: 60611
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 354286.31
Date: 11 / 06 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.11		7.94		10.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.89		71.07		89.96

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9069**
RUDY'S BAR & GRILLE
Mailing Address 69 E MADISON STREET
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 354359.64
Date: 11 / 07 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.40		57.93		73.33

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9089**
TAXI AFFILIATED SERVICES
Mailing Address 4536 N. ELSTON AVE.
City: CHICAGO State: IL Zip Code: 60630
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 354368.69
Date: 11 / 07 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.90		7.15		9.05

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8987**
ELEPHANT & CASTLE
Mailing Address 160 E HURON ST
City: CHICAGO State: IL Zip Code: 60611
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 354412.33
Date: 11 / 10 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.16		34.48		43.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.46		99.56		126.02

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9011**
JASON'S DELI
Mailing Address 1258 S CANAL ST
City: CHICAGO State: IL Zip Code: 60607
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 354655.43
Date: 11 / 10 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.05		192.05		243.10

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9015**
JEWEL-OSCO
Mailing Address 1224 S WABASH AVE
City: CHICAGO State: IL Zip Code: 60605
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 354686.75
Date: 11 / 10 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.58		24.74		31.32

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9063**
POTBELLY
Mailing Address 542 S DEARBORN ST
City: CHICAGO State: IL Zip Code: 60605
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 355039.61
Date: 11 / 10 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.10		278.76		352.86

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
131.73		495.55		627.28

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8952**
CASEY GORHAM
Mailing Address 15105 S MEADOW LN
City: PLAINFIELD State: IL Zip Code: 60544
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 355059.61
Date: 11/11/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		15.80		20.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9012**
MS. JEN DAULBY
Mailing Address 3926 12TH ST S
City: ARLINGTON State: VA Zip Code: 22204
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 355494.68
Date: 11/11/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.36		343.71		435.07

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9033**
MATTHEW GROSS
Mailing Address 400 N OAKLAND AVE APT 34
City: CARBONDALE State: IL Zip Code: 62901
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 356222.50
Date: 11/11/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.84		574.98		727.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
248.40		934.49		1182.89

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9121**
NATIONAL
Mailing Address 10124 NATURAL BRIDGE RD
City: ST LOUIS State: MO Zip Code: 63134
Purpose of Disbursement: DAULBY REIMBURSEMENT 11/11: CAR RENTAL
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 356657.57
Date: 11/11/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.36		343.71		435.07

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9122**
MATTHEW GROSS
Mailing Address 400 N OAKLAND AVE APT 34
City: CARBONDALE State: IL Zip Code: 62901
Purpose of Disbursement: GROSS REIMBURSEMENT 11/11: RENT
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 357207.57
Date: 11/11/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
115.50		434.50		550.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9124**
JIMMY JOHNS
Mailing Address 515.5 S ILLINOIS ST
City: CARBONDALE State: IL Zip Code: 62901
Purpose of Disbursement: GROSS REIMBURSEMENT 11/11: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 357237.62
Date: 11/11/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.31		23.74		30.05

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9125**
PAPA JOHNS
Mailing Address 602 E GRAND AVE
City CARBONDDALE State IL Zip Code 62901
Purpose of Disbursement:
GROSS REIMBURSEMENT 11/11: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type

Allocated Activity or Event:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 357261.15
Date 11/11/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.94		18.59		23.53

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9126**
SCHNUCKS
Mailing Address 915 W MAIN ST
City CARBONDALE State IL Zip Code 62901
Purpose of Disbursement:
GROSS REIMBURSEMENT 11/11: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type

Allocated Activity or Event:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 357385.39
Date 11/11/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.09		98.15		124.24

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9893**
SPOTHERO PARKING
Mailing Address 212 WEST SUPERIOR SUITE 201
City CHICAGO State IL Zip Code 60654
Purpose of Disbursement:
GORHAM REIMBURSEMENT: PARKING
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type

Allocated Activity or Event:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 357385.39
Date 11/11/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		15.80		20.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8933**
ABRAHAM LEVY
Mailing Address 901 GETTYSBURG DR
APT4
City BOURBONNAIS State IL Zip Code 60914
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 357593.11
Date 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.62		164.10		207.72

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8956**
CHI TAXI
Mailing Address 856-898 N MICHIGAN AVE
City CHICAGO State IL Zip Code 60611
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 357598.64
Date 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.16		4.37		5.53

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8963**
CHICAGO ELITE CAB
Mailing Address 2617 S WABASH AVE
City CHICAGO State IL Zip Code 60616
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 357605.73
Date 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.49		5.60		7.09

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.27		174.07		220.34

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8969**
CITY OF NAPERVILLE
Mailing Address 400 S EAGLE STREET
City: NAPERVILLE State: IL Zip Code: 60540
Purpose of Disbursement: UTILITIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 358225.47
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
130.15		489.59		619.74

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8979**
DARSHAN GOPI
Mailing Address 12 KIMBERLY CIRCLE
City: OAK BROOK State: IL Zip Code: 60523
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 358581.84
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.84		281.53		356.37

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9021**
KENNEDY CHIGLO
Mailing Address 544 WEST SCHUBERT AVE.
City: CHICAGO State: IL Zip Code: 60614
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 358612.39
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.42		24.13		30.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
211.41		795.25		1006.66

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9026**
LEXIS NEXIS
Mailing Address PO BOX 2314
City: CAROL STREAM State: IL Zip Code: 60132
Purpose of Disbursement: ONLINE SUBSCRIPTIONS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 358882.39
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.70		213.30		270.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9086**
STEPHEN POTTER II
Mailing Address 1920 WAUKEGAN RD STE 210
City: GLENVIEW State: IL Zip Code: 60025
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359407.44
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.26		414.79		525.05

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9087**
TARGET
Mailing Address 2656 N ELSTON AVE
City: CHICAGO State: IL Zip Code: 60647
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359498.11
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.04		71.63		90.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
186.00		699.72		885.72

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9099**
USPS
Mailing Address 100 W. RANDOLPH STREET
City: CHICAGO State: IL Zip Code: 60664
Purpose of Disbursement: POSTAGE
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359701.11
Date: 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.63		160.37		203.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9104**
WALGREENS
Mailing Address 79 W. MONROE STREET
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359713.88
Date: 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.68		10.09		12.77

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9105**
WALGREENS
Mailing Address 79 W. MONROE STREET
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359726.65
Date: 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.68		10.09		12.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.99		180.55		228.54

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9106**
WALGREENS
Mailing Address 79 W. MONROE STREET
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359758.33
Date: 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.65		25.03		31.68

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9128**
PIZZA HUT
Mailing Address 27025 W EAMES ST ROUTE 50
City: CHANNAHON State: IL Zip Code: 60410
Purpose of Disbursement: LEVY REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359777.10
Date: 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.94		14.83		18.77

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9129**
JEWEL OSCO
Mailing Address 2051 RIDGE RD
City: MINOOKA State: IL Zip Code: 60447
Purpose of Disbursement: LEVY REIMBURSEMENT 11/12: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359811.39
Date: 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.20		27.09		34.29

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.65		25.03		31.68

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9131**
FAT BOY'S PIZZA
Mailing Address 408 W MONDAMIN ST
City: MINOOKA State: IL Zip Code: 60447
Purpose of Disbursement:
LEVY REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359833.43
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.63		17.41		22.04

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9133**
FAST N FRESH
Mailing Address 103 N RIDGE RD
City: MINOOKA State: IL Zip Code: 60447
Purpose of Disbursement:
LEVY REIMBURSEMENT 11/12: TRAVEL: FUEL
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359939.13
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.20		83.50		105.70

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9135**
MCDONALDS
Mailing Address 102 N RIDGE RD
City: MINOOKA State: IL Zip Code: 60447
Purpose of Disbursement:
LEVY REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 359966.05
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.65		21.27		26.92

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9136**
LOU MALNATI'S PIZZERIA
Mailing Address 131 W JEFFERSON AVE
City: NAPERVILLE State: IL Zip Code: 60563
Purpose of Disbursement:
GOPI REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360137.37
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.98		135.34		171.32

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9138**
PITA LAND
Mailing Address 7831 W 95TH ST
City: HICKORY HILLS State: IL Zip Code: 60457
Purpose of Disbursement:
GOPI REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360156.54
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.03		15.14		19.17

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9139**
PAPA JOHNS
Mailing Address 602 E GRAND AVE
City: CARBONDDALE State: IL Zip Code: 62901
Purpose of Disbursement:
GOPI REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360173.68
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.60		13.54		17.14

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9140**
BUFFALO WILD WINGS
Mailing Address 1023 BROOKFOREST DR
City: SHOREWOOD State: IL Zip Code: 60404
Purpose of Disbursement: GOPI REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative **[MEMO ITEM]**
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360255.91
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.27		64.96		82.23

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9141**
OFFICE DEPOT
Mailing Address 6 S STATE ST
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: GOPI REIMBURSEMENT 11/12: OFFICE SUPPLIES
Activity or Event Identifier: Administrative **[MEMO ITEM]**
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360262.33
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.35		5.07		6.42

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9142**
JIMMY JOHNS
Mailing Address 515.5 S ILLINOIS ST
City: CARBONDALE State: IL Zip Code: 62901
Purpose of Disbursement: GOPI REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative **[MEMO ITEM]**
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360322.42
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.62		47.47		60.09

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9144**
CHOICE TAXI
Mailing Address 6550 N CLARK ST
City: CHICAGO State: IL Zip Code: 60626
Purpose of Disbursement: CHIGLO REIMBURSEMENT 11/12: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360339.72
Date: 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.63		13.67		17.30

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9146**
GLOBE TAXI
Mailing Address 4118 W LAWRENCE AVE
City: CHICAGO State: IL Zip Code: 60630
Purpose of Disbursement: CHIGLO REIMBURSEMENT 11/12: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360352.97
Date: 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.78		10.47		13.25

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9148**
GIORDANO'S PIZZA
Mailing Address 2540 N WAUKEGAN RD
City: GLENVIEW State: IL Zip Code: 60025
Purpose of Disbursement: POTTER REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360485.53
Date: 11/12/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.84		104.72		132.56

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9149**
BUFFALO WILD WINGS
Mailing Address 1023 BROOKFOREST DR
City: SHOREWOOD State: IL Zip Code: 60404
Purpose of Disbursement: POTTER REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360715.29
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.25		181.51		229.76

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9150**
STAPLES
Mailing Address 111 N. WABASH AVENUE
City: CHICAGO State: IL Zip Code: 60602
Purpose of Disbursement: POTTER REIMBURSEMENT 11/12: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360818.54
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.68		81.57		103.25

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9152**
NOODLES & COMPANY
Mailing Address 1851 TOWER DR
City: GLENVIEW State: IL Zip Code: 60025
Purpose of Disbursement: POTTER REIMBURSEMENT 11/12: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 360878.02
Date: 11 / 12 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.49		46.99		59.48

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9000**
ITALIAN VILLAGE
Mailing Address 71 W. MONROE ST.
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 361084.26
Date 11 / 13 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.31		162.93		206.24

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9016**
JIMMY JOHN'S GOURMET SANDWICHES
Mailing Address 6 E. MADISON STREET
City CHICAGO State IL Zip Code 60604
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 361198.69
Date 11 / 13 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.03		90.40		114.43

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9017**
JIMMY JOHN'S GOURMET SANDWICHES
Mailing Address 6 E. MADISON STREET
City CHICAGO State IL Zip Code 60604
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 361356.48
Date 11 / 13 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.14		124.65		157.79

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.48		377.98		478.46

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9088**
TAXI AFFILIATED SERVICES
Mailing Address 4536 N. ELSTON AVE.
City: CHICAGO State: IL Zip Code: 60630
Purpose of Disbursement: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 361363.73
Date: 11 / 13 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.52		5.73		7.25

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9101**
USPS - OAK BROOK
Mailing Address 1314 KENSINGTON ROAD
City: OAK BROOK State: IL Zip Code: 60523
Purpose of Disbursement: POSTAGE
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 361559.73
Date: 11 / 13 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.16		154.84		196.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8978**
DARSHAN GOPI
Mailing Address 12 KIMBERLY CIRCLE
City: OAK BROOK State: IL Zip Code: 60523
Purpose of Disbursement: PAYROLL < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 362028.40
Date: 11 / 14 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.42		370.25		468.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
141.10		530.82		671.92

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9020**
KENNEDY CHIGLO
Mailing Address 544 WEST SCHUBERT AVE.
City: CHICAGO State: IL Zip Code: 60614
Purpose of Disbursement: PAYROLL < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 362784.87
Date: 11 / 14 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
158.86		597.61		756.47

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9216**
STAPLES
Mailing Address 111 N. WABASH AVENUE
City: CHICAGO State: IL Zip Code: 60602
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 362837.80
Date: 11 / 17 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.12		41.81		52.93

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8938**
ALEXANDER HENDERSON
Mailing Address 55 W MONROE STE 940
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 362925.08
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.33		68.95		87.28

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
188.31		708.37		896.68

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8944**
ANDREW WELHOUSE
Mailing Address 303 S. HALSTED STREET
APT. 2
City CHICAGO State IL Zip Code 60661
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 363662.17
Date 11/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
154.79		582.30		737.09

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8977**
DARSHAN GOPI
Mailing Address 12 KIMBERLY CIRCLE
City OAK BROOK State IL Zip Code 60523
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 363759.48
Date 11/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.44		76.87		97.31

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8985**
DUSTIN RHODES
Mailing Address 16 MINNIE DR
City BELLEVILLE State IL Zip Code 62226
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 364341.51
Date 11/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.23		459.80		582.03

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
297.46		1118.97		1416.43

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9032**
MATTHEW GROSS
Mailing Address 400 N OAKLAND AVE
APT 34
City CARBONDALE State IL Zip Code 62901
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 365405.18
Date 11/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
223.37		840.30		1063.67

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9061**
PETER COLLINS
Mailing Address 3200 BARBARA DRIVE
City GLENVIEW State IL Zip Code 60026
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 365932.31
Date 11/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.70		416.43		527.13

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9074**
SAMUEL J LAWRENCE
Mailing Address 102 N MCCULLOUGH ST
STE 940
City URBANA State IL Zip Code 61801
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 366221.51
Date 11/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.73		228.47		289.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
394.80		1485.20		1880.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9085**
STEPHEN POTTER II
Mailing Address 1920 WAUKEGAN RD
STE 210
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 366861.72
Date 11/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
134.44		505.77		640.21

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9103**
WALGREENS
Mailing Address 79 W. MONROE STREET
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 366920.27
Date 11/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.30		46.25		58.55

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9110**
WOW ACCESS
Mailing Address 184 SHUMAN BLVD.
SUITE 100
City NAPERVILLE State IL Zip Code 60563
Purpose of Disbursement: BROADBAND SERVICES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 367070.17
Date 11/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.48		118.42		149.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
178.22		670.44		848.66

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9153**
UPS
Mailing Address 516 N. OGDEN AVE.
City CHICAGO State IL Zip Code 60642
Purpose of Disbursement:
HENDERSON REIMBURSEMENT 11/18: POSTAGE
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 367157.45
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.33		68.95		87.28

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9154**
ANDREW COLLINS
Mailing Address 308 S MAIN ST
APT 10
City EDWARDSVILLE State IL Zip Code 62025
Purpose of Disbursement:
TRAVEL: MILEAGE
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 367568.49
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.32		324.72		411.04

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9156**
ORDERFIND.COM
Mailing Address 225 E JOHN CARPENTER FREEWAY
STE 1500
City IRVING State TX Zip Code 75062
Purpose of Disbursement:
WELHOUSE REIMBURSEMENT 11/18: COMPUTER SOFTWARE
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 367816.03
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.98		195.56		247.54

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9158**
THE STATE HOUSE INN
Mailing Address 101 E ADAMS ST
City: SPRINGFIELD State: IL Zip Code: 62701
Purpose of Disbursement: WELHOUSE REIMBURSEMENT 11/18: TRAVEL: LODGING
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 367922.42
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.34		84.05		106.39

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9160**
KOAM TAXI
Mailing Address 6330 N CLARK ST
City: CHICAGO State: IL Zip Code: 60660
Purpose of Disbursement: WELHOUSE REIMBURSEMENT 11/18: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 367929.42
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.47		5.53		7.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9162**
DISPATCH TAXI
Mailing Address 4536 N ELSTON AVE
City: CHICAGO State: IL Zip Code: 60631
Purpose of Disbursement: WELHOUSE REIMBURSEMENT 11/18: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 367941.42
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.52		9.48		12.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9163**
OFFICE DEPOT
Mailing Address 6 S STATE ST
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement:
WELHOUSE REIMBURSEMENT 11/18: OFFICE SUPPLIES
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 368096.52
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.57		122.53		155.10

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9165**
YELLOW CAB
Mailing Address 3351 W ADDISON ST
City CHICAGO State IL Zip Code 60618
Purpose of Disbursement:
WELHOUSE REIMBURSEMENT 11/18: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 368112.52
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.36		12.64		16.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9166**
TARGET
Mailing Address 2656 N ELSTON AVE
City CHICAGO State IL Zip Code 60647
Purpose of Disbursement:
WELHOUSE REIMBURSEMENT 11/18: OFFICE SUPPLIES
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event:
[X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 368185.69
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.37		57.80		73.17

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9167**
USPS
Mailing Address 100 W. RANDOLPH STREET
City: CHICAGO State: IL Zip Code: 60664
Purpose of Disbursement: WELHOUSE REIMBURSEMENT 11/18: POSTAGE
Activity or Event Identifier: Administrative **[MEMO ITEM]**
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 368224.89
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.23		30.97		39.20

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9169**
MICHAELS
Mailing Address 3131 N CLARK ST
City: CHICAGO State: IL Zip Code: 60657
Purpose of Disbursement: WELHOUSE REIMBURSEMENT 11/18: OFFICE SUPPLIES
Activity or Event Identifier: Administrative **[MEMO ITEM]**
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 368258.83
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.13		26.81		33.94

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9171**
CVS
Mailing Address 205 N MICHIGAN AVE
City: CHICAGO State: IL Zip Code: 60601
Purpose of Disbursement: WELHOUSE REIMBURSEMENT 11/18: OFFICE SUPPLIES
Activity or Event Identifier: Administrative **[MEMO ITEM]**
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 368305.58
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.82		36.93		46.75

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9172**
UPS
Mailing Address 516 N. OGDEN AVE.
City: CHICAGO State: IL Zip Code: 60642
Purpose of Disbursement: GOPI REIMBURSEMENT 11/18: POSTAGE
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 368402.89
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.44		76.87		97.31

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9174**
PANERA BREAD
Mailing Address 5917 N ILLINOIS ST
City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208
Purpose of Disbursement: RHODES REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 368469.65
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.02		52.74		66.76

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9175**
STARBUCKS
Mailing Address 131 S DEARBORN STREET
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: RHODES REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 368500.04
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.38		24.01		30.39

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9176**
SAM'S CLUB
Mailing Address 2601 S CICERO AVE
City: CHICAGO State: IL Zip Code: 60804
Purpose of Disbursement: RHODES REIMBURSEMENT 11/18: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 368867.76
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.22		290.50		367.72

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9178**
KRISPY KREME
Mailing Address 5812 N ILLINOIS ST
City: FAIRVIEW HEIGHTS State: IL Zip Code: 62208
Purpose of Disbursement: RHODES REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 368912.41
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.38		35.27		44.65

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9179**
WAL-MART
Mailing Address 2080 N ST ROUTE 50
City: BOURBONNAIS State: IL Zip Code: 60914
Purpose of Disbursement: RHODES REIMBURSEMENT 11/18: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 368984.92
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.23		57.28		72.51

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9180**
MATTHEW GROSS
Mailing Address 400 N OAKLAND AVE
APT 34
City CARBONDALE State IL Zip Code 62901
Purpose of Disbursement: GROSS REIMBURSEMENT 11/18: MILEAGE
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 369171.40
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.16		147.32		186.48

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9181**
WAL-MART
Mailing Address 2080 N ST
ROUTE 50
City BOURBONNAIS State IL Zip Code 60914
Purpose of Disbursement: GROSS REIMBURSEMENT 11/18: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 369182.23
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.27		8.56		10.83

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9183**
QUATROS
Mailing Address 222 W FREEMAN
City CARBONDALE State IL Zip Code 62901
Purpose of Disbursement: GROSS REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 369201.45
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.04		15.18		19.22

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9185**
IMPARK
Mailing Address 172 W MADISON
City: CHICAGO State: IL Zip Code: 60602
Purpose of Disbursement: GROSS REIMBURSEMENT 11/18: PARKING
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 369239.45
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.98		30.02		38.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9186**
MATTHEW GROSS
Mailing Address 400 N OAKLAND AVE APT 34
City: CARBONDALE State: IL Zip Code: 62901
Purpose of Disbursement: GROSS REIMBURSEMENT 11/18: RENT
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 369789.45
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
115.50		434.50		550.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9187**
STAPLES
Mailing Address 111 N. WABASH AVENUE
City: CHICAGO State: IL Zip Code: 60602
Purpose of Disbursement: GROSS REIMBURSEMENT 11/18: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 369863.22
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.49		58.28		73.77

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9188**
JIMMY JOHNS
Mailing Address 515.5 S ILLINOIS ST
City: CARBONDALE State: IL Zip Code: 62901
Purpose of Disbursement:
GROSS REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 369885.17
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.61		17.34		21.95

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9189**
PAPA JOHNS
Mailing Address 602 E GRAND AVE
City: CARBONDDALE State: IL Zip Code: 62901
Purpose of Disbursement:
GROSS REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 369903.26
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.80		14.29		18.09

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9190**
SCHNUCKS
Mailing Address 915 W MAIN ST
City: CARBONDALE State: IL Zip Code: 62901
Purpose of Disbursement:
GROSS REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 370048.59
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.52		114.81		145.33

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9191**
BUFFALO WILD WINGS
Mailing Address 1023 BROOKFOREST DR
City: SHOREWOOD State: IL Zip Code: 60404
Purpose of Disbursement: PETER COLLINS REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 370117.06
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.38		54.09		68.47

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9192**
FEDEX
Mailing Address 942 S. SHADY GROVE ROAD
City: MEMPHIS State: TN Zip Code: 38119
Purpose of Disbursement: PETER COLLINS REIMBURSEMENT 11/18: DELIVERY SERVICES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 370554.72
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.91		345.75		437.66

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9194**
METRA
Mailing Address 1401 SHERMAN AVE
City: NORTHBROOK State: IL Zip Code: 60052
Purpose of Disbursement: PETER COLLINS REIMBURSEMENT 11/18: TRAVEL: RAIL
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 370575.72
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.41		16.59		21.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9196**
MANZELLAS ITALIAN RESTAURANT
Mailing Address 113 S FIRST ST
City CHAMPAIGN State IL Zip Code 61820
Purpose of Disbursement:
LAWRENCE REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 370719.05
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.10		113.23		143.33

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9197**
WAL-MART
Mailing Address 2080 N ST
ROUTE 50
City BOURBONNAIS State IL Zip Code 60914
Purpose of Disbursement:
LAWRENCE REIMBURSEMENT 11/18: OFFICE SUPPLIES
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 370826.93
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.65		85.23		107.88

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9199**
BOOST MOBILE
Mailing Address 9060 IRVINE CENTER DR
City IRVINE State CA Zip Code 92618
Purpose of Disbursement:
LAWRENCE REIMBURSEMENT 11/18: MOBILE PHONE EXPENSE
Activity or Event Identifier:
Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 370864.92
Date 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.98		30.01		37.99

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9200**
BUFFALO WILD WINGS
Mailing Address 1023 BROOKFOREST DR
City: SHOREWOOD State: IL Zip Code: 60404
Purpose of Disbursement: POTTER REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 371004.10
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.23		109.95		139.18

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9201**
NOODLES & COMPANY
Mailing Address 1851 TOWER DR
City: GLENVIEW State: IL Zip Code: 60025
Purpose of Disbursement: POTTER REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 371063.58
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.49		46.99		59.48

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9203**
TWIN DRAGON RESTAURANT
Mailing Address 9046 W GOLF RD
City: NILES State: IL Zip Code: 60714
Purpose of Disbursement: POTTER REIMBURSEMENT 11/18: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 371246.88
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.49		144.81		183.30

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9204**
UPS
Mailing Address 516 N. OGDEN AVE.
City: CHICAGO State: IL Zip Code: 60642
Purpose of Disbursement: POTTER REIMBURSEMENT 11/18: POSTAGE
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 371475.78
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.07		180.83		228.90

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9205**
STAPLES
Mailing Address 111 N. WABASH AVENUE
City: CHICAGO State: IL Zip Code: 60602
Purpose of Disbursement: POTTER REIMBURSEMENT 11/18: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 371505.13
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.16		23.19		29.35

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9211**
RED CURVE SOLUTIONS
Mailing Address 138 CONANT STREET
City: BEVERLY State: MA Zip Code: 01915
Purpose of Disbursement: DELIVERY SERVICES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 371523.43
Date: 11 / 18 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.84		14.46		18.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.84		14.46		18.30

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9215**
STAPLES
Mailing Address 111 N. WABASH AVENUE
City: CHICAGO State: IL Zip Code: 60602
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 371525.01
Date: 11/18/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.33		1.25		1.58

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8935**
ADAM MCLEAN
Mailing Address 8200 PIN OAK RD
City: EDWARDSVILLE State: IL Zip Code: 62025
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 371817.01
Date: 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.32		230.68		292.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8936**
ADRIANNE LONG
Mailing Address 119 WOLF AVE
City: HAMEL State: IL Zip Code: 62046
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 372817.01
Date: 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
271.65		1021.93		1293.58

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8937**
ALEC TROUT
Mailing Address 136 FAIRWAY DR
City: WATERLOO State: IL Zip Code: 62298
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 373067.01
Date: 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8939**
ALEXANDRA BRESCHI
Mailing Address 252 GIBSON ST
City: CARISLE State: PA Zip Code: 17013
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 374067.01
Date: 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8941**
ALEXANDREA KRUEGER
Mailing Address 55 W MONROE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 374317.01
Date: 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8942**
ALMA HERRERA
Mailing Address 8209 WILMOT RD
City: SPRING GROVE State: IL Zip Code: 60081
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 374567.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8948**
BENJAMIN POLONY
Mailing Address 55 W MONROE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 375067.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8949**
BRENNAN MILLER
Mailing Address 1042 ENCLAVE BLVD APT 303B
City: EDWARDSVILLE State: IL Zip Code: 62025
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 375400.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.93		263.07		333.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
227.43		855.57		1083.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8976**
DANIELA GARCIA
Mailing Address 322 W TREEHOUSE LN
City: ROUND LAKE State: IL Zip Code: 60073
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 375650.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8982**
DOMINICK SCAFIDI
Mailing Address 55 W MONROE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 375900.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8984**
DONALD CONKEY
Mailing Address 1122 LOCUST RD
City: WILMETTE State: IL Zip Code: 60091
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 376900.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8990**
EVAN SANDMAN
Mailing Address 55 W MONROE
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 377150.01
Date 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8997**
HANNAHRAE WILSON
Mailing Address 55 W MONROE
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 377400.01
Date 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8999**
HIRSCH NANGIA
Mailing Address 55 W MONROE
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 377650.01
Date 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.50		592.50		750.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9003**
IULIA LUPSE
Mailing Address 209 N CATHY LN
City: MT PROSPECT State: IL Zip Code: 60056
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 377900.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9005**
JAMES HAWKINS
Mailing Address 708 PONTIAC CT
City: ROUND LAKE HEIGHTS State: IL Zip Code: 60073
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 378150.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9007**
JAMES TALLIS
Mailing Address 55 W MONROE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 378650.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9014**
JENNIFER BECKER
Mailing Address 55 W MONROE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 378900.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9019**
JOHN DYSLIN
Mailing Address 820 BUTTERNUT LN UNIT C
City: MT PROSPECT State: IL Zip Code: 60056
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 379400.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9023**
KEVIN WADOWSKI
Mailing Address 3704 DEERWOOD DR
City: LONG GROVE State: IL Zip Code: 60047
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 379650.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9030**
LULIA VESEL
Mailing Address 644 SHABONEE TRAIL
City: MT PROSPECT State: IL Zip Code: 60056
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 379900.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9031**
MATEUSZ GORNIA
Mailing Address 9459 BAY COLONY DR APT 3S
City: DES PLAINES State: IL Zip Code: 60016
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 380150.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9047**
MICHAEL PAWEL PIRGA
Mailing Address 55 W MONROE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 380400.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.50		592.50		750.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9048**
MICHAEL WHITE
Mailing Address 1015 KNOLL LN
City: WHILMETTE State: IL Zip Code: 60091
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 380650.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9049**
MIRANDA LUCE
Mailing Address 540 PINE LAKE
City: LAKE FOREST State: IL Zip Code: 60045
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 381650.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9051**
MITCHELL LEEFERS
Mailing Address 55 W MONROE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 381900.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9052**
NANCY HOTH
Mailing Address 261 DIAMOND HEAD DR
City: DES PLAINES State: IL Zip Code: 60018
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 382150.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9060**
PETER BURNS
Mailing Address 4818 HEATHER LN
City: BETHALTO State: IL Zip Code: 62010
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 382650.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9065**
RICHARD SANTI
Mailing Address 55 W MONROE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 382900.01
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9071**
RYAN BRANNAN
Mailing Address 55 W MONROE
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 383150.01
Date 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9077**
SARA MORADI
Mailing Address 1216 PINE ST APT A
City GLENVIEW State IL Zip Code 60025
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 383400.01
Date 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9079**
PAUL SHUBHAM
Mailing Address 55 W MONROE
City CHICAGO State IL Zip Code 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 383650.01
Date 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.50		592.50		750.00

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9084**
STEPHANIE MCCARTHY
Mailing Address 108 CLUB CENTER CIR
APT 9
City: EDWARDSVILLE State: IL Zip Code: 62025
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 384150.01
Date: 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9093**
TIMOTHY SCHNEIDER
Mailing Address 55 W MONROE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 384498.15
Date: 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.11		275.03		348.14

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9939**
EMBASSY SUITES
Mailing Address 201 HARRISON OAKS BLVD
City: CARY State: NC Zip Code: 27513
Purpose of Disbursement: SCHNEIDER REIMBURSEMENT: TRAVEL: LODGING
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 384498.15
Date: 11/19/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
61.56		231.58		293.14

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
178.11		670.03		848.14

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9941**
O'HARE AIRPORT
Mailing Address 10000 W O'HARE AVE
City: CHICAGO State: IL Zip Code: 60666
Purpose of Disbursement: SCHNEIDER REIMBURSEMENT: PARKING
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 384498.15
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.14		26.86		34.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9943**
TAXI CAB IN CARY LLC
Mailing Address SUMMER RIDGE TOWNHOMES
City: CARY State: NC Zip Code: 27511
Purpose of Disbursement: SCHNEIDER REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
[MEMO ITEM]
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 384498.15
Date: 11 / 19 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.41		16.59		21.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9214**
STAPLES
Mailing Address 111 N. WABASH AVENUE
City: CHICAGO State: IL Zip Code: 60602
Purpose of Disbursement: OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 384595.82
Date: 11 / 20 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.51		77.16		97.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.51		77.16		97.67

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8954**
CHANDLER'S CHOP HOUSE
Mailing Address 401 N ROSELLE RD
City: SCHAUMBURG State: IL Zip Code: 60194
Purpose of Disbursement: MEETING EXPENSE: MEALS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 386596.97
Date: 11/24/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
420.24		1580.91		2001.15

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8967**
CHRISTOPHER PIPER
Mailing Address 2303 BELMORE DR
City: CHAMPAIGN State: IL Zip Code: 61821
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 387596.97
Date: 11/24/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8988**
ETHAN SMITH
Mailing Address 110 E CHALMERS ST
City: CHAMPAIGN State: IL Zip Code: 61820
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 388596.97
Date: 11/24/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
840.24		3160.91		4001.15

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8992**
FREECONFERENCE
Mailing Address 4300 E PACIFIC COAST HWY
City: LONG BEACH State: CA Zip Code: 90804
Purpose of Disbursement: ONLINE SUBSCRIPTIONS
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 388702.73
Date: 11 / 24 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.21		83.55		105.76

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.8993**
GODADDY.COM
Mailing Address 14455 N HAYDEN RD SUITE 226
City: SCOTTSDALE State: AZ Zip Code: 85260
Purpose of Disbursement: WEB HOSTING
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 388715.74
Date: 11 / 24 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.73		10.28		13.01

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9025**
KOREY DECKER
Mailing Address 55 W MONROE
City: CHICAGO State: IL Zip Code: 60603
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 389715.74
Date: 11 / 24 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
234.94		883.83		1118.77

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9035**
MAXWELL WEISS
Mailing Address 110 E CHALMERS
City CHAMPAIGN State IL Zip Code 61820
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 390715.74
Date 11/24/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9040**
MEDIACOM
Mailing Address PO BOX 5744
City CAROL STREAM State IL Zip Code 60197
Purpose of Disbursement: RENT & UTILITIES
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 391633.95
Date 11/24/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
192.82		725.39		918.21

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9045**
MICHAEL LAUREANO
Mailing Address 1007 S FIRST ST #8
City CHAMPAIGN State IL Zip Code 61820
Purpose of Disbursement: FIELD CONSULTING < 25% FED
Activity or Event Identifier: Administrative
Category/Type
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt [ ] Voter Drive [ ] Direct Candidate Support [ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 392633.95
Date 11/24/2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
612.82		2305.39		2918.21

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

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9108**
WEST BEND MUTUAL INSURANCE

Mailing Address 188 W INDUSTRIAL DRIVE
SUITE 430

City: ELMHURST State: IL Zip Code: 60126

Purpose of Disbursement: LIABILITY INSURANCE

Activity or Event Identifier: Administrative

Category/Type

Allocated Activity or Event:
- [x] Administrative
- [ ] Fundraising
- [ ] Exempt
- [ ] Voter Drive
- [ ] Direct Candidate Support
- [ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 393109.04

Date: 11 / 24 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
99.77		375.32		475.09

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.9546**
SARA KARLOVICS

Mailing Address PO BOX 7941

City: GURNEE State: IL Zip Code: 60031

Purpose of Disbursement: FUNDRAISING CONSULTING

Activity or Event Identifier: 7.11.14 Fundraising event(07/11/2014)

Category/Type

Allocated Activity or Event:
- [ ] Administrative
- [x] Fundraising
- [ ] Exempt
- [ ] Voter Drive
- [ ] Direct Candidate Support
- [ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 12666.98

Date: 10 / 20 / 2014

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.40		5.60		40.00

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

Mailing Address

City State Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Category/Type

Allocated Activity or Event:
- [ ] Administrative
- [ ] Fundraising
- [ ] Exempt
- [ ] Voter Drive
- [ ] Direct Candidate Support
- [ ] Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date: M M / D D / Y Y Y Y

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
134.17		380.92		515.09

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
14605.44	54820.45	69425.89