

**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 Political Active Letter Carriers

ADDRESS (number and street)

P.O. Box 7008

Check if different  
than previously  
reported. (ACC)

Rock Island

IL

61204

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00264689

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☒ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

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

Election on

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

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
09 01 2020

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Bultinck, Tony, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Bultinck, Tony, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 07 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Illinois Political Active Letter Carriers

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		<input type="text" value="81229.20"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="95861.68"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="944.60"/>	<input type="text" value="45126.30"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="96806.28"/>	<input type="text" value="126355.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3596.31"/>	<input type="text" value="33145.53"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="93209.97"/>	<input type="text" value="93209.97"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

☒ 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. 05/2016)

Page 3

Write or Type Committee Name

Illinois Political Active Letter Carriers

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 09 / 01 / 2020

To:

 M M / D D / Y Y Y Y  
 09 / 30 / 2020
**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).....

550.00

26880.15

(ii) Unitemized .....

394.60

18246.15

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

944.60

45126.30

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

944.60

45126.30

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

944.60

45126.30

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

944.60

45126.30

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	96.31	895.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	96.31	895.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	3500.00	32250.00
30. Federal Election Activity (52 U.S.C. § 30101(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 .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3596.31	33145.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3596.31	33145.53

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	944.60	45126.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	944.60	45126.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	96.31	895.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	96.31	895.53

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

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

FOR LINE NUMBER: PAGE 6 OF 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Political Active Letter Carriers

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ciszczon, John, , ,

Mailing Address 900 S. Meadow Pkwy  
#2022

City  
Reno

State  
NV

Zip Code  
89521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPS

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2020

Transaction ID : SA11AI-2147483589

Amount of Each Receipt this Period

20.00

☐ Memo Item  
contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Colegrove, David, , ,

Mailing Address 270 S. Enhglish  
61

City

Braidwood

State

IL

Zip Code

60408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPS

Occupation (for Individual)  
Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2020

Transaction ID : SA11AI-2147483586

Amount of Each Receipt this Period

50.00

☐ Memo Item  
contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Colegrove, David, , ,

Mailing Address 270 S. Enhglish  
61

City

Braidwood

State

IL

Zip Code

60408

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPS

Occupation (for Individual)  
Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2020

Transaction ID : SA11AI-2147483585

Amount of Each Receipt this Period

100.00

☐ Memo Item  
contribution

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

170.00

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)

PAGE 7 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Illinois Political Active Letter Carriers**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Dowdle, Mark, , ,**

Mailing Address 20736 Canterbury Dr

City  
Shorewood

State  
IL

Zip Code  
60436

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPS

Occupation (for Individual)  
Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2020

**Transaction ID : SA11AI-2147483632**

Amount of Each Receipt this Period

45.00

☐ Memo Item  
contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Dowdle, Mark, , ,**

Mailing Address 20736 Canterbury Dr

City  
Shorewood

State  
IL

Zip Code  
60436

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPS

Occupation (for Individual)  
Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2020

**Transaction ID : SA11AI-2147483608**

Amount of Each Receipt this Period

15.00

☐ Memo Item  
contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Goodman, Catherine, , ,**

Mailing Address 8919 Burlington Ave.

At. 25

City  
Brookfield

State  
IL

Zip Code  
60513

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPS

Occupation (for Individual)  
Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2020

**Transaction ID : SA11AI-2147483628**

Amount of Each Receipt this Period

150.00

☐ Memo Item  
contribution

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

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

210.00

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

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

FOR LINE NUMBER: PAGE 8 OF 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Illinois Political Active Letter Carriers**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Goodman, Catherine, , ,**

Mailing Address 8919 Burlington Ave.  
 At. 25

City  
 Brookfield

State  
 IL

Zip Code  
 60513

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 USPS

Occupation (for Individual)  
 Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2020

Transaction ID : SA11AI-2147483604

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hahn, William, , ,**

Mailing Address W7774 Dakota Ln.

City

Westfield

State

WI

Zip Code

53964

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2020

Transaction ID : SA11AI-2147483603

Amount of Each Receipt this Period

10.00

☐ Memo Item  
 contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mullen, Joseph, , ,**

Mailing Address 443 Thomas ave.

City

Forest Park

State

IL

Zip Code

60130

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 USPS

Occupation (for Individual)  
 Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2020

Transaction ID : SA11AI-2147483599

Amount of Each Receipt this Period

10.00

☐ Memo Item  
 contribution

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

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

70.00



# **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)

PAGE 9 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Illinois Political Active Letter Carriers**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schorsch, William, , ,**

Mailing Address 33417 North Park

City  
Wildwood

State  
IL

Zip Code  
60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPS

Occupation (for Individual)  
Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2020

**Transaction ID : SA11AI-2147483619**

Amount of Each Receipt this Period

75.00

☐ Memo Item  
contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Schorsch, William, , ,**

Mailing Address 33417 North Park

City  
Wildwood

State  
IL

Zip Code  
60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USPS

Occupation (for Individual)  
Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 14 / 2020

**Transaction ID : SA11AI-2147483595**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

100.00

550.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 12

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

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NAME OF COMMITTEE (In Full)

**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial)

**A. Office Max-Moline**

Mailing Address 4215 27th Street

City  
MolineState  
ILZip Code  
61265Purpose of Disbursement  
office supplies ink

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2020

FEC Identification Number

**C****Transaction ID : SB21B.-2147**

Amount of Each Disbursement this Period

81.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

81.31

81.31

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 12

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

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NAME OF COMMITTEE (In Full)

**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Meg Loughran Cappel**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2020

Mailing Address 529 Northgate Lane

FEC Identification Number

**C****Transaction ID : SB29.-214748**

Amount of Each Disbursement this Period

1000.00

☐ Memo ItemCity  
ShorewoodState  
ILZip Code  
60404Purpose of Disbursement  
fundraiserCategory/  
Type

Candidate Name

**Committee to Elect Meg Loughran Cappel**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Didech, Daniel, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2020

Mailing Address P.O. Box 4959

FEC Identification Number

**C****Transaction ID : SB29.-214748**

Amount of Each Disbursement this Period

500.00

☐ Memo ItemCity  
Buffalo GroveState  
ILZip Code  
60089Purpose of Disbursement  
contributionCategory/  
Type

Candidate Name

**Didech, Daniel, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Friends of Brandon Zanotti**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2020

Mailing Address P.O. Box 322

FEC Identification Number

**C****Transaction ID : SB29.-214748**

Amount of Each Disbursement this Period

500.00

☐ Memo ItemCity  
Johnston CityState  
ILZip Code  
62951Purpose of Disbursement  
sponsorshipCategory/  
Type

Candidate Name

**Friends of Brandon Zanotti**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: IL

District:

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

2000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 12

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

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NAME OF COMMITTEE (In Full)

**Illinois Political Active Letter Carriers**

Full Name (Last, First, Middle Initial)

**A. Illinois Alliance for Retired Americans**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2020

Mailing Address 2229 S. Halsted St.  
2nd floorCity  
ChicagoState  
ILZip Code  
60608Purpose of Disbursement  
sponsorship

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB29.-214748**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Newman, Marie, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2020

Mailing Address P.O. Box 549

City  
LaGrangeState  
ILZip Code  
60525Purpose of Disbursement  
contribution

Candidate Name

**Newman, Marie, , ,**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2020  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

FEC Identification Number

**C****Transaction ID : SB29.-214748**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

3500.00