

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

To Protect Our Heritage PAC

ADDRESS (number and street) 2421 W. Pratt

Check if different than previously reported. (ACC) Chicago IL 60645

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00135541

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 07 01 2009 through 12 31 2009

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 Alan E. Molotsky

Signature of Treasurer Electronically Filed by Alan E. Molotsky Date 01 31 2010

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							
-----------------	--	--	--	--	--	--	--

FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
To Protect Our Heritage PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		207496.35
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	214965.63									
(c) Total Receipts (from Line 19)	7800.14	39085.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	222765.77	246581.92								
7. Total Disbursements (from Line 31)	10463.04	34279.19								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	212302.73	212302.73								
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)	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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
To Protect Our Heritage PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	2080.00	24130.00
(ii) Unitemized	1763.14	10659.01
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3843.14	34789.01
(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)	3843.14	34789.01
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.)	3957.00	4296.56
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 Transfer (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))	7800.14	39085.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7800.14	39085.57

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) Shared 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.....	8463.04	18529.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	8463.04	18529.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	15750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	10463.04	34279.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10463.04	34279.19

DETAILED SUMMARY PAGE
of Disbursements

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	3843.14	34789.01
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3843.14	34789.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8463.04	18529.19
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8463.04	18529.19

**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 6 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Alan Cahn		Date of Receipt
	Mailing Address 6653 N. Minnehaha		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 04 / 2009
	City	State	Zip Code
	Lincolnwood	IL	60712
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5855
Name of Employer Walgreens		Occupation Pharmacist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 530.00	<input type="text"/> 180.00
Contribution to PAC			

B.	Full Name (Last, First, Middle Initial) Mr. Norman Demb		Date of Receipt
	Mailing Address 320 Wesley Ave.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 12 / 2009
	City	State	Zip Code
	Evanston	IL	60202
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5860
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	<input type="text"/> 80.00
Contribution to PAC			

C.	Full Name (Last, First, Middle Initial) Arthur Goldner		Date of Receipt
	Mailing Address 40 Maple Hill Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 05 / 2009
	City	State	Zip Code
	Glencoe	IL	60022
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5865
Name of Employer Arthur Goldner & Associates		Occupation Real estate executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 250.00
Contribution to PAC			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 510.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Full Name (Last, First, Middle Initial)
Mr. Mickey Harris

Mailing Address 7351 N. Keeler

City Lincolnwood State IL Zip Code 60712

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

Name of Employer Imperial Nursing Center Occupation Building Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 29 / 2009

Transaction ID: SA11AI.5856

Amount of Each Receipt this Period 250.00

Contribution to PAC

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

Mailing Address 2633 Lake Bluff Terrace

City St. Joseph State MI Zip Code 49085

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

Name of Employer Morgan Stanley Smith Barney Occupation Consultant Wealth Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 07 / 08 / 2009

Transaction ID: SA11AI.5871

Amount of Each Receipt this Period 800.00

Contribution to PAC

C. Full Name (Last, First, Middle Initial)
Mr. Andrew Lappin

Mailing Address 630 Lincoln Ave.

City Glencoe State IL Zip Code 60022

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

Name of Employer Shetland Limited Partnership Occupation Real Estate Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2009

Transaction ID: SA11AI.5857

Amount of Each Receipt this Period 500.00

Contribution to PAC

SUBTOTAL of Receipts This Page (optional) ► 1550.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 19	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Lawrence Savitt		Date of Receipt																					
	Mailing Address 1771 Mission Hills #316		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	3		2	0	0	9														
	City State Zip Code Northbrook IL 60062		Transaction ID: SA11AI.5866																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00																					
Name of Employer Lawrence Medical Supply		Occupation President																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Contribution to PAC Aggregate Year-to-Date ▼ 370.00																						

SUBTOTAL of Receipts This Page (optional)	▶	20.00
TOTAL This Period (last page this line number only)	▶	2080.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 19
(check only one)

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

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Full Name (Last, First, Middle Initial)
1st Equity Bank Northwest
Mailing Address 1330 Dundee

City State Zip Code
Buffalo Grove IL 60089

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3695.79

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 08 / 2009

Transaction ID: SA17.5854

Amount of Each Receipt this Period
3695.79

Interest on savings account

B. Full Name (Last, First, Middle Initial)
First Suburban Bank
Mailing Address 150 S. Fifth Avenue

City State Zip Code
Maywood IL 60153

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.70

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2009

Transaction ID: SA17.5846

Amount of Each Receipt this Period
46.14

Interest on checking account

C. Full Name (Last, First, Middle Initial)
First Suburban Bank
Mailing Address 150 S. Fifth Avenue

City State Zip Code
Maywood IL 60153

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
431.56

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2009

Transaction ID: SA17.5847

Amount of Each Receipt this Period
45.86

Interest on checking account

SUBTOTAL of Receipts This Page (optional) ► **3787.79**

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

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

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

FOR LINE NUMBER: PAGE 10 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Full Name (Last, First, Middle Initial)
First Suburban Bank
Mailing Address 150 S. Fifth Avenue

City State Zip Code
Maywood IL 60153

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

Transaction ID: SA17.5848
 Amount of Each Receipt this Period
44.21
 Interest on checking account

B. Full Name (Last, First, Middle Initial)
First Suburban Bank
Mailing Address 150 S. Fifth Avenue

City State Zip Code
Maywood IL 60153

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	9

Transaction ID: SA17.5849
 Amount of Each Receipt this Period
45.09
 Interest on checking account

C. Full Name (Last, First, Middle Initial)
First Suburban Bank
Mailing Address 150 S. Fifth Avenue

City State Zip Code
Maywood IL 60153

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
562.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	9

Transaction ID: SA17.5850
 Amount of Each Receipt this Period
41.29
 Interest on checking account

SUBTOTAL of Receipts This Page (optional) ► **130.59**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 19
(check only one)

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

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.

Full Name (Last, First, Middle Initial)
First Suburban Bank

Mailing Address 150 S. Fifth Avenue

City State Zip Code
Maywood IL 60153

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.77

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA17.5851

Amount of Each Receipt this Period
38.62

Interest on checking account

SUBTOTAL of Receipts This Page (optional)	▶	38.62
TOTAL This Period (last page this line number only)	▶	3957.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Chicago Festival of Israeli Cinema Mailing Address P.O. Box 118512 City Chicago State IL Zip Code 60611 Purpose of Disbursement Publicity for PAC at community event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5828 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 9	Amount of Each Disbursement this Period 450.00
B.	Full Name (Last, First, Middle Initial) Beth M. Dunn Mailing Address 300 E. Dundee Rd. Apt. 304 City Buffalo Grove State IL Zip Code 60089 Purpose of Disbursement Typing for website development Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5868 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 395.18
C.	Full Name (Last, First, Middle Initial) Diane Horwitz Mailing Address 247 E. Chestnut St. City Chicago State IL Zip Code 60611 Purpose of Disbursement Reimbursement for expenses for member meeting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5861 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 9	Amount of Each Disbursement this Period 339.42

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)

PAGE 13 / 19

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

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Alan E. Molotsky	Transaction ID: SB21B.5840 Date of Disbursement
	Mailing Address 3939 W. Greenwood	<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City Skokie State IL Zip Code 60076	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage for membership mailing for solicitation	<input type="text" value="352.00"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alan E. Molotsky	Transaction ID: SB21B.5835 Date of Disbursement
	Mailing Address 3939 W. Greenwood	<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Skokie State IL Zip Code 60076	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage reimbursement non-solicitation mailings to members	<input type="text" value="154.70"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Moneris Solutions Inc.	Transaction ID: SB21B.5820 Date of Disbursement
	Mailing Address 700 East Lake Cook Road	<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City Elk Grove Village State IL Zip Code 60089	Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly credit card processing fee	<input type="text" value="55.00"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="561.70"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Moneris Solutions Inc.</p> <p>Mailing Address 700 East Lake Cook Road</p> <p>City Elk Grove Village State IL Zip Code 60089</p> <p>Purpose of Disbursement Credit card processing rfees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5821</p> <p>Date of Disbursement 08 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 56.90</p> <p>003 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Moneris Solutions Inc.</p> <p>Mailing Address 700 East Lake Cook Road</p> <p>City Elk Grove Village State IL Zip Code 60089</p> <p>Purpose of Disbursement Credit card processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5823</p> <p>Date of Disbursement 09 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 55.00</p> <p>003 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Moneris Solutions Inc.</p> <p>Mailing Address 700 East Lake Cook Road</p> <p>City Elk Grove Village State IL Zip Code 60089</p> <p>Purpose of Disbursement Credit card processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5824</p> <p>Date of Disbursement 10 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 55.00</p> <p>003 Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>166.90</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Moneris Solutions Inc.	Transaction ID: SB21B.5825 Date of Disbursement
	Mailing Address 700 East Lake Cook Road	<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City Elk Grove Village State IL Zip Code 60089	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card processing fee Candidate Name	<input type="text" value="55.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Moneris Solutions Inc.	Transaction ID: SB21B.5826 Date of Disbursement
	Mailing Address 700 East Lake Cook Road	<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Elk Grove Village State IL Zip Code 60089	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card processing fee Candidate Name	<input type="text" value="55.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Mosaic Enterprises Inc.	Transaction ID: SB21B.5841 Date of Disbursement
	Mailing Address 4150 Emerson St.	<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Skokie State IL Zip Code 60076	Amount of Each Disbursement this Period
	Purpose of Disbursement Website development Candidate Name	<input type="text" value="700.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="810.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) Mosaic Enterprises Inc.	Transaction ID: SB21B.5842 Date of Disbursement 11 / 16 / 2009
	Mailing Address 4150 Emerson St.	Amount of Each Disbursement this Period 70.00
	City Skokie State IL Zip Code 60076	
	Purpose of Disbursement Website development & update Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Eric Rapaport	Transaction ID: SB21B.5827 Date of Disbursement 08 / 11 / 2009
	Mailing Address 434 Regent Drive	Amount of Each Disbursement this Period 1170.00
	City Buffalo Grove State IL Zip Code 60089	
	Purpose of Disbursement Website development Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Red Cell Intelligence Group, Inc.	Transaction ID: SB21B.5844 Date of Disbursement 07 / 10 / 2009
	Mailing Address 312 Independence Ave. SE	Amount of Each Disbursement this Period 3000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Honorarium for speaker at educational event - not solicitation Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4240.00
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)

PAGE 17 / 19

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

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Full Name (Last, First, Middle Initial) Red Cell Intelligence Group, Inc. <hr/> Mailing Address 312 Independence Ave. SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Travel for speaker at educational event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5845 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 564.75
	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Peggy P. Shapiro <hr/> Mailing Address 4545 W. Touhy <hr/> City Lincolnwood State IL Zip Code 60712 <hr/> Purpose of Disbursement reimburse for food for member meeting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5864 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 116.33
	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Peggy P. Shapiro <hr/> Mailing Address 4545 W. Touhy <hr/> City Lincolnwood State IL Zip Code 60712 <hr/> Purpose of Disbursement E-mail service reimbursement for member contact list development Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5843 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 105.36
	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

786.44

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.	Full Name (Last, First, Middle Initial) The Mail Post	Transaction ID: SB21B.5829 Date of Disbursement
	Mailing Address 2421 W. Pratt	<input type="text" value="07"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City Chicago State IL Zip Code 60645	Amount of Each Disbursement this Period
	Purpose of Disbursement Mailing service and postage	<input type="text" value="300.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: SB21B.5837 Date of Disbursement
	Mailing Address Dirkson Federal Office Building	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City Chicago State IL Zip Code 60604	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage for mailings to members	<input type="text" value="220.00"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Victor Weissberg	Transaction ID: SB21B.5862 Date of Disbursement
	Mailing Address 4820 W. Sherwin	<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City Lincolnwood State IL Zip Code 60712	Amount of Each Disbursement this Period
	Purpose of Disbursement Website hosting charges	<input type="text" value="193.40"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="713.40"/>
TOTAL This Period (last page this line number only)	<input type="text" value="8463.04"/>

**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)

PAGE 19 / 19

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

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

NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A.

Full Name (Last, First, Middle Initial)
QUIGLEY FOR CONGRESS

Transaction ID: SB23.5833
Date of Disbursement

Mailing Address PO Box 13040

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	0	9

City Chicago State IL Zip Code 60613

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution to candidate committee

011
Category/
Type

Candidate Name
QUIGLEY FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: IL District: 05

B.

Full Name (Last, First, Middle Initial)
ROSKAM, PETER

Transaction ID: SB23.5830
Date of Disbursement

Mailing Address 141 Shelley Lane

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	2		2	0	0	9

City Wheaton State IL Zip Code 60187

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution to candidate committee

011
Category/
Type

Candidate Name
ROSKAM, PETER

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: IL District: 06

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00
