# 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

DEMOCRATIC PARTY OF ILLINOIS

ADDRESS (number and street) ▼ P.O. BOX 518

.

☐ Check if different than previously reported. (ACC)

SPRINGFIELD | IL | 62705 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00167015

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 11 / DD 04 / YYYY 2014 in the State of

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

Election on MM / DD / YYYY in the State of

5. Covering Period MM 10 / DD 01 / YYYY 2014 through MM 10 / DD 15 / YYYY 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 Michael Kasper

Signature of Treasurer *Michael Kasper* ***[Electronically Filed]*** Date MM 10 / DD 23 / YYYY 2014

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

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



Write or Type Committee Name

DEMOCRATIC PARTY OF ILLINOIS

Report Covering the Period: From: 10 / 01 / 2014 To: 10 / 15 / 2014

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|
| 6. (a) Cash on Hand January 1, 2014 | | 763467.65 |
| (b) Cash on Hand at Beginning of Reporting Period | 871320.55 | |
| (c) Total Receipts (from Line 19) | 1690655.12 | 4142917.14 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 2561975.67 | 4906384.79 |
| 7. Total Disbursements (from Line 31) | 1410927.48 | 3755336.60 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 1151048.19 | 1151048.19 |
| 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) | 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. 06/2004)



Write or Type Committee Name

DEMOCRATIC PARTY OF ILLINOIS

Report Covering the Period: From: M M 10 / D D 01 / Y Y Y Y 2014 To: M M 10 / D D 15 / 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) | 142950.00 | 514229.00 |
| (ii) Unitemized | 559.60 | 10523.60 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶ | 143509.60 | 524752.60 |
| (b) Political Party Committees | 5155.50 | 56954.47 |
| (c) Other Political Committees (such as PACs) | 673627.88 | 2093831.94 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶ | 822292.98 | 2675539.01 |
| 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.) | 54746.00 | 384685.81 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 30713.68 | 299789.86 |
| (b) Levin Funds (from Schedule H5) | 782902.46 | 782902.46 |
| (c) Total Transfers (add 18(a) and 18(b)) | 813616.14 | 1082692.32 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶ | 1690655.12 | 4142917.14 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶ | 877038.98 | 3060224.82 |

# 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 | 15999.56 | 128362.43 |
| (ii) Non-Federal Share | 60188.84 | 482887.58 |
| (b) Other Federal Operating Expenditures | 0.00 | 18761.32 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶ | 76188.40 | 630011.33 |
| 22. Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) | 0.00 | 0.00 |
| 26. Loan Repayments Made | 0.00 | 0.00 |
| 27. Loans Made | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶ | 0.00 | 0.00 |
| 29. Other Disbursements | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 100107.23 | 308239.45 |
| (ii) "Levin" Share | 376593.88 | 1159567.43 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 858037.97 | 1657518.39 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶ | 1334739.08 | 3125325.27 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 1410927.48 | 3755336.60 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶ | 974144.76 | 2112881.59 |

# 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) | 822292.98 | 2675539.01 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 822292.98 | 2675539.01 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶ | 15999.56 | 147123.75 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶ | 15999.56 | 147123.75 |

# 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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Kenneth Allred
Mailing Address: 3522 Lakeway Dr
City: Ellicott City | State: MD | Zip Code: 21042
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon | Occupation: VP-IT\
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 10 / 03 / 2014
**Transaction ID : SA11AI.36160**
Amount of Each Receipt this Period: 1000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): John T . Anthony
Mailing Address: 541 Prescott Road
City: Merion Station | State: PA | Zip Code: 19066
FEC ID number of contributing federal political committee: C
Name of Employer: Com Ed | Occupation: VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 10 / 09 / 2014
**Transaction ID : SA11AI.36179**
Amount of Each Receipt this Period: 2500.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Richard Astle
Mailing Address: 3120 N. Sheridan Road
City: Chicago | State: IL | Zip Code: 60657
FEC ID number of contributing federal political committee: C
Name of Employer: Sidley Austin LLP | Occupation: Lawyer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 10 / 12 / 2014
**Transaction ID : SA11AI.36207**
Amount of Each Receipt this Period: 500.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 4000.00

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): John Barry
Mailing Address: 5337 Fox Crest
City: Edwardsville | State: IL | Zip Code: 62040
FEC ID number of contributing federal political committee.: C
Name of Employer: Gori, Julian & Associates, PC
Occupation: Attorney - Partner
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 10000.00
Date of Receipt: 10 / 01 / 2014
**Transaction ID : SA11AI.35793**
Amount of Each Receipt this Period: 10000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Russell Budd
Mailing Address: 4514 Cole Avenue
City: Dallas | State: TX | Zip Code: 75205
FEC ID number of contributing federal political committee.: C
Name of Employer: Baron & Budd, Inc.
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 10000.00
Date of Receipt: 10 / 01 / 2014
**Transaction ID : SA11AI.35784**
Amount of Each Receipt this Period: 10000.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Joan Clifford
Mailing Address: 840 N. Lake Shore Drive
City: Chicago | State: IL | Zip Code: 60611
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 ▼: 10000.00
Date of Receipt: 10 / 09 / 2014
**Transaction ID : SA11AI.36186**
Amount of Each Receipt this Period: 10000.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 30000.00

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Robert Clifford
Mailing Address: 840 N. Lake Shore Drive
City: Chicago State: IL Zip Code: 60611
FEC ID number of contributing federal political committee: C
Name of Employer: Clifford Law
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 10000.00
Date of Receipt: 10 / 09 / 2014
Transaction ID : SA11AI.36187
Amount of Each Receipt this Period: 10000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): James Conway
Mailing Address: 7912 Keystone Road
City: Orland Park State: IL Zip Code: 60462
FEC ID number of contributing federal political committee: C
Name of Employer: Com Ed
Occupation: Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 03 / 2014
Transaction ID : SA11AI.36161
Amount of Each Receipt this Period: 500.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Christopher Costanzo
Mailing Address: 7528 Talley Abbey Way
City: Baldwinsville State: WY Zip Code: 13027
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon
Occupation: Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 09 / 2014
Transaction ID : SA11AI.36180
Amount of Each Receipt this Period: 500.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 11000.00

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): John Doerrer
Mailing Address: 1705 N. Rutherford
City: Chicago State: IL Zip Code: 60607
FEC ID number of contributing federal political committee: C
Name of Employer: John A. Doerrer & Associates P
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 10 / 12 / 2014
**Transaction ID : SA11AI.36208**
Amount of Each Receipt this Period: 1000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Terence Donnelly
Mailing Address: 8042 Shag Bark Lane
City: Burr Ridge State: IL Zip Code: 60527
FEC ID number of contributing federal political committee: C
Name of Employer: Com Ed
Occupation: EVP operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 10 / 01 / 2014
**Transaction ID : SA11AI.35771**
Amount of Each Receipt this Period: 2500.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Ronald Donovan
Mailing Address: 749 Fox Run
City: Geneva State: IL Zip Code: 60134
FEC ID number of contributing federal political committee: C
Name of Employer: Com Ed
Occupation: Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 10 / 03 / 2014
**Transaction ID : SA11AI.36165**
Amount of Each Receipt this Period: 1000.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 4500.00

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Jose Fernandez
Mailing Address: PMB 607 # 105 89 Ave De Diego
City: San Juan State: PR Zip Code: 00927
FEC ID number of contributing federal political committee: C
Name of Employer: Oriental Financial Group
Occupation: President and CeO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1200.00

Date of Receipt: 10 / 09 / 2014
**Transaction ID : SA11AI.36194**
Amount of Each Receipt this Period: 1200.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Mary Jane Fernandez
Mailing Address: PMB 607 # 105, 85 Ave. De Diego
City: San Juan State: PR Zip Code: 00927
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: 1200.00

Date of Receipt: 10 / 09 / 2014
**Transaction ID : SA11AI.36196**
Amount of Each Receipt this Period: 1200.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Leonard Gail
Mailing Address: 440 West Belden Avenue
City: Chicago State: IL Zip Code: 60614
FEC ID number of contributing federal political committee: C
Name of Employer: Massey & Gail
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 10000.00

Date of Receipt: 10 / 09 / 2014
**Transaction ID : SA11AI.36198**
Amount of Each Receipt this Period: 10000.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 12400.00

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Paul Gaynor
Mailing Address: 645 Forest Avenue
City: Evanston State: IL Zip Code: 60202
FEC ID number of contributing federal political committee: C
Name of Employer: G & R Public Law
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3000.00
Date of Receipt: 10/03/2014
Transaction ID : SA11AI.36166
Amount of Each Receipt this Period: 2500.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Randy Gori
Mailing Address: 4586 Mooney Creek Lane
City: Edwardsville State: IL Zip Code: 62025
FEC ID number of contributing federal political committee: C
Name of Employer: Gori, Julian and Assoc.
Occupation: Partner
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 10000.00
Date of Receipt: 10/01/2014
Transaction ID : SA11AI.35790
Amount of Each Receipt this Period: 10000.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Keith A. Hebeisen
Mailing Address: 2828 Woodmere Court
City: Northbrook State: IL Zip Code: 60062
FEC ID number of contributing federal political committee: C
Name of Employer: Clifford Law Offices
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10/09/2014
Transaction ID : SA11AI.36200
Amount of Each Receipt this Period: 5000.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 17500.00

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Edward Jandacek
Mailing Address: 6607 St. James Court
City: Downers Grove | State: IL | Zip Code: 60516
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon | Occupation: Vice President Supply
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: M M 10 / D D 03 / Y Y Y Y 2014
**Transaction ID : SA11AI.36167**
Amount of Each Receipt this Period: 1000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Kristopher Keys
Mailing Address: 3847 Junebreeze
City: Naperville | State: IL | Zip Code: 60564
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon | Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: M M 10 / D D 14 / Y Y Y Y 2014
**Transaction ID : SA11AI.36212**
Amount of Each Receipt this Period: 500.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Mary Korsnick
Mailing Address: 3510 Castle Way
City: Davidsonville | State: MD | Zip Code: 21035
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon | Occupation: Sr. Vice President Northeast Operation
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: M M 10 / D D 01 / Y Y Y Y 2014
**Transaction ID : SA11AI.35772**
Amount of Each Receipt this Period: 500.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 2000.00

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Jerry A. Latherow
Mailing Address: 1852 N. Burling Street
City: Chicago State: IL Zip Code: 60614
FEC ID number of contributing federal political committee: C
Name of Employer: Latherow Law Office
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3000.00
Date of Receipt: 10 / 03 / 2014
Transaction ID : SA11AI.36155
Amount of Each Receipt this Period: 3000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Baldemar Lopez
Mailing Address: 2559 Boardwalk Boulevard
City: Hoffman Estates State: IL Zip Code: 60169
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: 1000.00
Date of Receipt: 10 / 03 / 2014
Transaction ID : SA11AI.36174
Amount of Each Receipt this Period: 1000.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Michael McClaion
Mailing Address: 1300 Tuscany Drive
City: Quincy State: IL Zip Code: 62305
FEC ID number of contributing federal political committee: C
Name of Employer: IRMA
Occupation: Executive Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00
Date of Receipt: 10 / 12 / 2014
Transaction ID : SA11AI.36209
Amount of Each Receipt this Period: 1500.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 5500.00

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Michael McMahan
Mailing Address: 39W677 Caribou Trail
City: Saint Charles | State: IL | Zip Code: 60175
FEC ID number of contributing federal political committee: C
Name of Employer: Com Ed | Occupation: Engineer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 10 / 14 / 2014
**Transaction ID : SA11AI.36213**
Amount of Each Receipt this Period: 1000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Steven Naumann
Mailing Address: 8210 Tripp Avenue
City: Skokie | State: IL | Zip Code: 60076
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon | Occupation: Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 10 / 01 / 2014
**Transaction ID : SA11AI.35775**
Amount of Each Receipt this Period: 500.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Melissa Nigro
Mailing Address: 967 Fell Street
City: Baltimore | State: MD | Zip Code: 21231
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon | Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 10 / 01 / 2014
**Transaction ID : SA11AI.35776**
Amount of Each Receipt this Period: 2000.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 3500.00

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Denis O'Brien
Mailing Address: 321 Canterbury Road
City: Havertown | State: PA | Zip Code: 19083
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon | Occupation: Utility Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2000.00
Date of Receipt: 10 / 03 / 2014
**Transaction ID : SA11AI.36168**
Amount of Each Receipt this Period: 2000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Kevin O'Shea
Mailing Address: 411 N. High Street
City: Port Byron | State: IL | Zip Code: 61275
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon | Occupation: Plant manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 10 / 01 / 2014
**Transaction ID : SA11AI.35778**
Amount of Each Receipt this Period: 500.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Joseph Pacher
Mailing Address: 227 Basket Road
City: Webster | State: NY | Zip Code: 14580
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon | Occupation: Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 10 / 09 / 2014
**Transaction ID : SA11AI.36182**
Amount of Each Receipt this Period: 500.00
Contribution

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Anne Pramaggiore
Mailing Address: 89 Hills & Dales Road
City: Barrington Hills State: IL Zip Code: 60010
FEC ID number of contributing federal political committee: C
Name of Employer: Com Ed
Occupation: Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 01 / 2014
Transaction ID : SA11AI.35780
Amount of Each Receipt this Period: 5000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Martin Proctor
Mailing Address: 100 Constellation Way
City: Baltimore State: MD Zip Code: 21201
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon Corporation
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00
Date of Receipt: 10 / 01 / 2014
Transaction ID : SA11AI.35781
Amount of Each Receipt this Period: 1500.00
Contribution

**C.** Full Name (Last, First, Middle Initial): David Rhoades
Mailing Address: 820 Adrienne Court
City: Ottawa State: IL Zip Code: 61350
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00
Date of Receipt: 10 / 03 / 2014
Transaction ID : SA11AI.36150
Amount of Each Receipt this Period: 1500.00
Contribution

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Bruce Sagan
Mailing Address: 415 E. North Water # 1505
City: Chicago State: IL Zip Code: 60611
FEC ID number of contributing federal political committee: C
Name of Employer: Herald Newspaper
Occupation: Jounalist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 10000.00
Date of Receipt: 10 / 01 / 2014
**Transaction ID : SA11AI.35799**
Amount of Each Receipt this Period: 10000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Mary Jacobs Skinner
Mailing Address: 1 1st National Plaza
City: Chicago State: IL Zip Code: 60603
FEC ID number of contributing federal political committee: C
Name of Employer: Sidley and Austin
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 12 / 2014
**Transaction ID : SA11AI.36211**
Amount of Each Receipt this Period: 500.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Steven Solomon
Mailing Address: 1523 Gardenside Court
City: Naperville State: IL Zip Code: 60540
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 / 01 / 2014
**Transaction ID : SA11AI.35782**
Amount of Each Receipt this Period: 500.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 11000.00

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Jennifer Steans
Mailing Address: 2234 Lincolnwood
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: 10000.00
Date of Receipt: 10 / 01 / 2014
Transaction ID : SA11AI.35795
Amount of Each Receipt this Period: 10000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): Katherine Tisdahl
Mailing Address: 53 W. Jackson Boulevard
City: Chicago State: IL Zip Code: 60604
FEC ID number of contributing federal political committee: C
Name of Employer: Inclusion Solutions
Occupation: Owner
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 10 / 09 / 2014
Transaction ID : SA11AI.36205
Amount of Each Receipt this Period: 2500.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Joseph R Trpik Jr.
Mailing Address: 838 W Lill Ave
City: Chicago State: IL Zip Code: 60614
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon
Occupation: CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00
Date of Receipt: 10 / 01 / 2014
Transaction ID : SA11AI.35783
Amount of Each Receipt this Period: 1500.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 14000.00

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): William Von Hoene
Mailing Address: 6901 S. Constance Avenue
City: Chicago State: IL Zip Code: 60649
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon
Occupation: General Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 03 / 2014
Transaction ID : SA11AI.36170
Amount of Each Receipt this Period: 5000.00
Contribution

**B.** Full Name (Last, First, Middle Initial): John Washko
Mailing Address: 1619 N. 159th Road
City: Streater State: IL Zip Code: 61364
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon
Occupation: Plant Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 03 / 2014
Transaction ID : SA11AI.36151
Amount of Each Receipt this Period: 250.00
Contribution

**C.** Full Name (Last, First, Middle Initial): Bruce Wilson
Mailing Address: 333 Leicester Road
City: Kenilworth State: IL Zip Code: 60043
FEC ID number of contributing federal political committee: C
Name of Employer: Exelon
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 10 / 03 / 2014
Transaction ID : SA11AI.36171
Amount of Each Receipt this Period: 1000.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 6250.00

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.**
Full Name (Last, First, Middle Initial): Robert Wilson
Mailing Address: 20 N. Michigan Avenue
City: Chicago State: IL Zip Code: 60602
FEC ID number of contributing federal political committee: C
Name of Employer: US Equities Realty
Occupation: Real Estate
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 10000.00
Date of Receipt: 10 / 03 / 2014
Transaction ID : SA11AI.36178
Amount of Each Receipt this Period: 10000.00
Contribution

**B.**
Full Name (Last, First, Middle Initial): Karen Yarbrough
Mailing Address: 217 S. 2nd Avenue
City: Maywood State: IL Zip Code: 60153
FEC ID number of contributing federal political committee: C
Name of Employer: Best efforts
Occupation: Best efforts
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 / 03 / 2014
Transaction ID : SA11AI.36176
Amount of Each Receipt this Period: 300.00
Contribution

**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) ▶ 10300.00

**TOTAL** This Period (last page this line number only) ▶ 142950.00

# 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)
DEMOCRATIC PARTY OF ILLINOIS

**A.**
Full Name (Last, First, Middle Initial)
DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Mailing Address 430 SOUTH CAPITOL STREET SE

City: WASHINGTON
State: DC
Zip Code: 20003

FEC ID number of contributing federal political committee.: C C00460147

Name of Employer:
Occupation:

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

Aggregate Year-to-Date ▼ 27594.09

Date of Receipt: 10 / 08 / 2014

**Transaction ID : SA11B.36158**

Amount of Each Receipt this Period: 5155.50

Contribution

**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) ▶ 5155.50

**TOTAL** This Period (last page this line number only) ▶ 5155.50

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

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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial)
AMERICA WORKS PAC

Mailing Address PO BOX 15293

City: WASHINGTON State: DC Zip Code: 20003

FEC ID number of contributing federal political committee. C C00331694

Name of Employer

Occupation

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

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: M M 10 / D D 09 / Y Y Y Y 2014

**Transaction ID : SA11C.36184**

Amount of Each Receipt this Period 5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)
BLUE DOG POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 83142

City: GAITHERSBURG State: MD Zip Code: 20883

FEC ID number of contributing federal political committee. C C00305318

Name of Employer

Occupation

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

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: M M 10 / D D 03 / Y Y Y Y 2014

**Transaction ID : SA11C.36153**

Amount of Each Receipt this Period 5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)
COMMON GROUND PAC

Mailing Address 1490 QUARTERPATH ROAD NUMBER 272

City: WILLIAMSBURG State: VA Zip Code: 23185

FEC ID number of contributing federal political committee. C C00538835

Name of Employer

Occupation

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

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: M M 10 / D D 01 / Y Y Y Y 2014

**Transaction ID : SA11C.35786**

Amount of Each Receipt this Period 5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 15000.00

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City: Washington | State: DC | Zip Code: 20003

FEC ID number of contributing federal political committee: C

Name of Employer | Occupation

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

Aggregate Year-to-Date ▼ 1670494.06

Date of Receipt: M M 10 / D D 02 / Y Y Y Y 2014

**Transaction ID : SA11C.36215**

Amount of Each Receipt this Period: 452060.00

Contribution

**B.** Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E. #2

City: Washington | State: DC | Zip Code: 20003

FEC ID number of contributing federal political committee: C

Name of Employer | Occupation

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

Aggregate Year-to-Date ▼ 1853944.06

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

**Transaction ID : SA11C.36217**

Amount of Each Receipt this Period: 183450.00

Contribution

**C.** Full Name (Last, First, Middle Initial)
Democratic County Chairmens Federal Account

Mailing Address P.O. Box 3445

City: Springfield | State: IL | Zip Code: 62708

FEC ID number of contributing federal political committee: C

Name of Employer | Occupation

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

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: M M 10 / D D 09 / Y Y Y Y 2014

**Transaction ID : SA11C.36188**

Amount of Each Receipt this Period: 5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 640510.00

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): EMILY'S LIST
Mailing Address: 1800 M STREET, NW, STE 375N
City: WASHINGTON State: DC Zip Code: 20036
FEC ID number of contributing federal political committee: C C00193433
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 10 / 09 / 2014
**Transaction ID : SA11C.36192**
Amount of Each Receipt this Period: 2500.00
Contribution

**B.** Full Name (Last, First, Middle Initial): HOYER FOR CONGRESS
Mailing Address: 700 13TH STREET, NW, SUITE 600
City: WASHINGTON State: DC Zip Code: 20005
FEC ID number of contributing federal political committee: C C00140715
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 483.20
Date of Receipt: 10 / 07 / 2014
**Transaction ID : SA11C.36220**
Amount of Each Receipt this Period: 483.20
In-kind - Travel

**C.** Full Name (Last, First, Middle Initial): HOYER FOR CONGRESS
Mailing Address: 700 13TH STREET, NW, SUITE 600
City: WASHINGTON State: DC Zip Code: 20005
FEC ID number of contributing federal political committee: C C00140715
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 617.88
Date of Receipt: 10 / 13 / 2014
**Transaction ID : SA11C.36221**
Amount of Each Receipt this Period: 134.68
In-kind - Travel

**SUBTOTAL** of Receipts This Page (optional) ▶ 3117.88

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.**
Full Name (Last, First, Middle Initial): IMPACT
Mailing Address: 192 LEXINGTON AVE. SUITE 1001
City: NEW YORK State: NY Zip Code: 10016
FEC ID number of contributing federal political committee: C C00348607
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 10 / 09 / 2014
**Transaction ID : SA11C.36201**
Amount of Each Receipt this Period: 5000.00
Contribution

**B.**
Full Name (Last, First, Middle Initial): PAC FOR A LEVEL PLAYING FIELD
Mailing Address: 124 WASHINGTON STREET SUITE 101
City: FOXBORO State: MA Zip Code: 02035
FEC ID number of contributing federal political committee: C C00540195
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 10 / 09 / 2014
**Transaction ID : SA11C.36203**
Amount of Each Receipt this Period: 5000.00
Contribution

**C.**
Full Name (Last, First, Middle Initial): WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT
Mailing Address: 702 S.W. 8TH STREET
City: BENTONVILLE State: AR Zip Code: 72716
FEC ID number of contributing federal political committee: C C00093054
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 10 / 01 / 2014
**Transaction ID : SA11C.35800**
Amount of Each Receipt this Period: 5000.00
Contribution

**SUBTOTAL** of Receipts This Page (optional) ▶ 15000.00

**TOTAL** This Period (last page this line number only) ▶ 673627.88

# 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)
DEMOCRATIC PARTY OF ILLINOIS

**A.**
Full Name (Last, First, Middle Initial): AIG
Mailing Address: 22427 Network Place
City: Chicago State: IL Zip Code: 60673-1224
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 6829.00
Date of Receipt: M M 10 / D D 10 / Y Y Y Y 2014
**Transaction ID : SA17.36219**
Amount of Each Receipt this Period: 6829.00
Credit for insurance

**B.**
Full Name (Last, First, Middle Initial): DUCKWORTH FOR CONGRESS
Mailing Address: P.O. BOX 8867
City: ROLLING MEADOWS State: IL Zip Code: 60008
FEC ID number of contributing federal political committee: C C00498634
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 30167.00
Date of Receipt: M M 10 / D D 01 / Y Y Y Y 2014
**Transaction ID : SA17.35788**
Amount of Each Receipt this Period: 27167.00
Unlimited transfer

**C.**
Full Name (Last, First, Middle Initial): Friends of Leslie Hairston
Mailing Address: P.O. Box 497028
City: Chicago State: IL Zip Code: 60649-7028
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 750.00
Date of Receipt: M M 10 / D D 03 / Y Y Y Y 2014
**Transaction ID : SA17.36156**
Amount of Each Receipt this Period: 750.00
Vote builder

**SUBTOTAL** of Receipts This Page (optional) ▶ 34746.00

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.**
Full Name (Last, First, Middle Initial): QUIGLEY FOR CONGRESS
Mailing Address: PO BOX 13040
City: CHICAGO State: IL Zip Code: 60613
FEC ID number of contributing federal political committee: C C00457556
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 21500.00
Date of Receipt: 10 / 01 / 2014
**Transaction ID : SA17.35797**
Amount of Each Receipt this Period: 20000.00
Unlimited transfer

**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) ▶ 20000.00

**TOTAL** This Period (last page this line number only) ▶ 54746.00

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Andrew Adamski
Mailing Address: 3 Winston Road
City: East Lyme State: CT Zip Code: 06333
Purpose of Disbursement: Wages
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 10 / Y Y Y Y 2014
**Transaction ID : SB30B.35700**
Amount of Each Disbursement this Period: 1972.26

**B.** Full Name (Last, First, Middle Initial): May Affre
Mailing Address: 1803 Country Drive Apt. 301
City: Grayslake State: IL Zip Code: 60030
Purpose of Disbursement: Wages
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 10 / Y Y Y Y 2014
**Transaction ID : SB30B.35713**
Amount of Each Disbursement this Period: 1108.54

**C.** Full Name (Last, First, Middle Initial): Collin Akers
Mailing Address: 616 Sherman Avenue
City: Edwardsville State: IL Zip Code: 62025
Purpose of Disbursement: Wages
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 10 / Y Y Y Y 2014
**Transaction ID : SB30B.35701**
Amount of Each Disbursement this Period: 1268.74

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4349.54

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Anastasia Almasi
Mailing Address: 1825 Holmes Avenue
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35735**
Amount of Each Disbursement this Period: 1088.07

**B.** Full Name (Last, First, Middle Initial): Saeid Barghi
Mailing Address: 1211 Lockwood Drive
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35670**
Amount of Each Disbursement this Period: 1083.85

**C.** Full Name (Last, First, Middle Initial): Sakina Bennett
Mailing Address: 7345 Amherst Avenue
City: Saint Louis State: MO Zip Code: 63130
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35702**
Amount of Each Disbursement this Period: 1108.52

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3280.44

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Bryan Besser
Mailing Address: 365 Dogwood Terrace
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35671**
Amount of Each Disbursement this Period: 1083.84

**B.** Full Name (Last, First, Middle Initial): Steffanie Bezruki
Mailing Address: 57 Rhode Island Avenue
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35714**
Amount of Each Disbursement this Period: 1108.53

**C.** Full Name (Last, First, Middle Initial): William Biagi
Mailing Address: 339 Jocelyn Place
City: Highwood State: IL Zip Code: 60040
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35672**
Amount of Each Disbursement this Period: 1112.95

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3305.32

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Blue Calls, LLC
Mailing Address: 1626 Beekman Place NW, Unit B
City: Washington State: DC Zip Code: 20009
Purpose of Disbursement: Robocall with Dick Durbin
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/12/2014
**Transaction ID : SB30B.35760**
Amount of Each Disbursement this Period: 10404.06

**B.** Full Name (Last, First, Middle Initial): Wesley Boensel
Mailing Address: 15671 Sunset Street
City: Petersburg State: IL Zip Code: 62675
Purpose of Disbursement: Insurance reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
**Transaction ID : SB30B.35646**
Amount of Each Disbursement this Period: 1847.08

**C.** Full Name (Last, First, Middle Initial): Wesley Boensel
Mailing Address: 15671 Sunset Street
City: Petersburg State: IL Zip Code: 62675
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
**Transaction ID : SB30B.35743**
Amount of Each Disbursement this Period: 1747.62

**SUBTOTAL** of Disbursements This Page (optional) ▶ 13998.76

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Sylvia Bowman
Mailing Address: 1918 Clover Avenue
City: Rockford State: IL Zip Code: 61102
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35715
Amount of Each Disbursement this Period: 1083.84

**B.** Full Name (Last, First, Middle Initial): Amy Brown
Mailing Address: 39 Regent Drive
City: Gilbens State: IL Zip Code: 60136
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35673
Amount of Each Disbursement this Period: 1083.84

**C.** Full Name (Last, First, Middle Initial): Ian Bruckner
Mailing Address: 941 Highland Lane
City: Irvington State: NY Zip Code: 10533
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35674
Amount of Each Disbursement this Period: 1083.83

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3251.51

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Brenda Carrillo
Mailing Address: 2919 Wichita Avenue
City: Amarillo State: TX Zip Code: 79107
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35716**
Amount of Each Disbursement this Period: 1083.84

**B.** Full Name (Last, First, Middle Initial): Michael Carson
Mailing Address: 3821 N. Damen Avenue
City: Chicago State: IL Zip Code: 60618
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35731**
Amount of Each Disbursement this Period: 1754.84

**C.** Full Name (Last, First, Middle Initial): Central Management Services
Mailing Address: P.O. Box 10077
City: Springfield State: IL Zip Code: 62791
Purpose of Disbursement: Insurance-Almasi
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35645**
Amount of Each Disbursement this Period: 781.06

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3619.74

**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 [X] 30b



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial)
Central Management Services

Mailing Address P.O. Box 10077

City: Springfield State: IL Zip Code: 62791

Purpose of Disbursement: Insurance-Cory

Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 10 / 10 / 2014

**Transaction ID : SB30B.35647**

Amount of Each Disbursement this Period: 1185.80

**B.** Full Name (Last, First, Middle Initial)
Central Management Services

Mailing Address P.O. Box 10077

City: Springfield State: IL Zip Code: 62791

Purpose of Disbursement: Insurance-Cousineau

Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 10 / 10 / 2014

**Transaction ID : SB30B.35648**

Amount of Each Disbursement this Period: 1797.42

**C.** Full Name (Last, First, Middle Initial)
Central Management Services

Mailing Address P.O. Box 10077

City: Springfield State: IL Zip Code: 62791

Purpose of Disbursement: Insurance-Hall

Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement: 10 / 10 / 2014

**Transaction ID : SB30B.35649**

Amount of Each Disbursement this Period: 700.74

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3683.96

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial)
Central Management Services

Mailing Address P.O. Box 10077

City: Springfield State: IL Zip Code: 62791

Purpose of Disbursement: Insurance-Maley

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 10 / 10 / 2014

**Transaction ID : SB30B.35651**

Amount of Each Disbursement this Period: 631.78

**B.** Full Name (Last, First, Middle Initial)
Central Management Services

Mailing Address P.O. Box 10077

City: Springfield State: IL Zip Code: 62791

Purpose of Disbursement: Insurance-Maxson

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 10 / 10 / 2014

**Transaction ID : SB30B.35652**

Amount of Each Disbursement this Period: 784.36

**C.** Full Name (Last, First, Middle Initial)
Central Management Services

Mailing Address P.O. Box 10077

City: Springfield State: IL Zip Code: 62791

Purpose of Disbursement: Insurance-Mehundrew

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 10 / 10 / 2014

**Transaction ID : SB30B.35653**

Amount of Each Disbursement this Period: 1418.12

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2834.26

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial)
Central Management Services

Mailing Address P.O. Box 10077

City: Springfield State: IL Zip Code: 62791

Purpose of Disbursement: Insurance-Murray

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 10 / 10 / 2014

**Transaction ID : SB30B.35654**

Amount of Each Disbursement this Period: 1848.74

**B.** Full Name (Last, First, Middle Initial)
Central Management Services

Mailing Address P.O. Box 10077

City: Springfield State: IL Zip Code: 62791

Purpose of Disbursement: Insurance-Nagel

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 10 / 10 / 2014

**Transaction ID : SB30B.35655**

Amount of Each Disbursement this Period: 1656.08

**C.** Full Name (Last, First, Middle Initial)
Central Management Services

Mailing Address P.O. Box 10077

City: Springfield State: IL Zip Code: 62791

Purpose of Disbursement: Insurance-Nippa

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 10 / 10 / 2014

**Transaction ID : SB30B.35656**

Amount of Each Disbursement this Period: 781.88

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4286.70

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Central Management Services
Mailing Address: P.O. Box 10077
City: Springfield State: IL Zip Code: 62791
Purpose of Disbursement: Insurance-Schuette
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35657
Amount of Each Disbursement this Period: 783.54

**B.** Full Name (Last, First, Middle Initial): Central Management Services
Mailing Address: P.O. Box 10077
City: Springfield State: IL Zip Code: 62791
Purpose of Disbursement: Insurance-Sullivan
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35658
Amount of Each Disbursement this Period: 783.54

**C.** Full Name (Last, First, Middle Initial): Emily Cheong
Mailing Address: 3895 Anjou Lane
City: Hoffman Estates State: IL Zip Code: 60192
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35675
Amount of Each Disbursement this Period: 1083.83

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2650.91

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Ronald Chiu
Mailing Address: 18248 Cork Road
City: Tinley Park State: IL Zip Code: 60477
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35717**
Amount of Each Disbursement this Period: 1083.83

**B.** Full Name (Last, First, Middle Initial): Thomas Cory
Mailing Address: 2081 W. Monroe Street # 6
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35744**
Amount of Each Disbursement this Period: 947.16

**C.** Full Name (Last, First, Middle Initial): William Cousinear
Mailing Address: 2009 S. Glenwood
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Mileage reimbursement
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 06 / 2014
**Transaction ID : SB30B.35613**
Amount of Each Disbursement this Period: 191.00

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2221.99

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): William Cousinear
Mailing Address: 2009 S. Glenwood
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Reimbursement C
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 06 / 2014
Transaction ID : SB30B.35614
Amount of Each Disbursement this Period: 3268.87

**B.** Full Name (Last, First, Middle Initial): William Cousinear
Mailing Address: 2009 S. Glenwood
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
Transaction ID : SB30B.35745
Amount of Each Disbursement this Period: 4460.11

**C.** Full Name (Last, First, Middle Initial): Marshall Derks
Mailing Address: 328 S. Woodrow Streeet
City: Columbia State: SC Zip Code: 29205
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
Transaction ID : SB30B.35718
Amount of Each Disbursement this Period: 1503.26

**SUBTOTAL** of Disbursements This Page (optional) ▶ 9232.24

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Alex Dintruff
Mailing Address: 526 E. Prospect Avenue
City: Lake Bluff State: IL Zip Code: 60044
Purpose of Disbursement: Wages
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 10 / Y Y Y Y 2014
**Transaction ID : SB30B.35660**
Amount of Each Disbursement this Period: 1268.74

**B.** Full Name (Last, First, Middle Initial): Jeffrey Easterling
Mailing Address: 1787 Vermont Drive
City: Elk Grove State: IL Zip Code: 60007
Purpose of Disbursement: Wages
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 10 / Y Y Y Y 2014
**Transaction ID : SB30B.35676**
Amount of Each Disbursement this Period: 1083.84

**C.** Full Name (Last, First, Middle Initial): Edward Hall
Mailing Address: 333 S. Lewis
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Wages
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 10 / Y Y Y Y 2014
**Transaction ID : SB30B.35737**
Amount of Each Disbursement this Period: 1112.77

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3465.35

**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

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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Shane Henson
Mailing Address: 30148 Oakview
City: Livonia State: MI Zip Code: 48154
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35677**
Amount of Each Disbursement this Period: 1083.83

**B.** Full Name (Last, First, Middle Initial): Internal Revenue Service
Mailing Address: Department of the Treasury
City: Kansas City State: MO Zip Code: 64999
Purpose of Disbursement: Payroll taxes
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35728**
Amount of Each Disbursement this Period: 23977.60

**C.** Full Name (Last, First, Middle Initial): Internal Revenue Service
Mailing Address: Department of the Treasury
City: Kansas City State: MO Zip Code: 64999
Purpose of Disbursement: Payroll taxes
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35729**
Amount of Each Disbursement this Period: 43631.12

**SUBTOTAL** of Disbursements This Page (optional) ▶ 68692.55

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Brexton Isaacs
Mailing Address: 917 Kingsway Lane
City: Byron State: IL Zip Code: 61010
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35667
Amount of Each Disbursement this Period: 1083.83

**B.** Full Name (Last, First, Middle Initial): Dauntre Jenkins
Mailing Address: 914 E. Willxcox Street
City: Peoria State: IL Zip Code: 61603
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35703
Amount of Each Disbursement this Period: 1112.95

**C.** Full Name (Last, First, Middle Initial): Steven Johnson
Mailing Address: 1411 E. Reservoir Street
City: Springfield State: IL Zip Code: 62702
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35668
Amount of Each Disbursement this Period: 1182.60

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3379.38

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Kevin Josephs
Mailing Address: 1308 E. Campbell Street
City: Arlington Heights State: IL Zip Code: 60004
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35678**
Amount of Each Disbursement this Period: 1083.83

**B.** Full Name (Last, First, Middle Initial): Elizabeth Jung
Mailing Address: 25 Kassebaum Lane
City: Saint Louis State: MO Zip Code: 63129
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35690**
Amount of Each Disbursement this Period: 1459.05

**C.** Full Name (Last, First, Middle Initial): Daniel Kallio
Mailing Address: 3733 S. Lowe Avenue
City: Chicago State: IL Zip Code: 60609
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35691**
Amount of Each Disbursement this Period: 1083.83

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3626.71

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Matthew Kalmick
Mailing Address: 555 W. Strafford Place
City: Chicago State: IL Zip Code: 60657
Purpose of Disbursement: Wages
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 10 / Y Y Y Y 2014
**Transaction ID : SB30B.35679**
Amount of Each Disbursement this Period: 1142.08

**B.** Full Name (Last, First, Middle Initial): Kimberly Kargman
Mailing Address: 221 Mt. Auburn Street
City: Cambridge State: MA Zip Code: 02138
Purpose of Disbursement: Wages
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 10 / Y Y Y Y 2014
**Transaction ID : SB30B.35661**
Amount of Each Disbursement this Period: 1922.24

**C.** Full Name (Last, First, Middle Initial): James Keefe
Mailing Address: 504 E. Waters Edge Drive
City: Belleville State: IL Zip Code: 62221
Purpose of Disbursement: Wages
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 10 / Y Y Y Y 2014
**Transaction ID : SB30B.35680**
Amount of Each Disbursement this Period: 1083.83

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4148.15

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Erin Kellogg
Mailing Address: 457 Landings Loop W
City: Westerville State: OH Zip Code: 43082
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
**Transaction ID : SB30B.35704**
Amount of Each Disbursement this Period: 1108.52

**B.** Full Name (Last, First, Middle Initial): Kylie Kelly
Mailing Address: 10230 S. Bell
City: Chicago State: IL Zip Code: 60643
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
**Transaction ID : SB30B.36223**
Amount of Each Disbursement this Period: 1027.79

**C.** Full Name (Last, First, Middle Initial): Robert Kern
Mailing Address: 1530 State Street
City: Bettendorf State: IA Zip Code: 52722
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
**Transaction ID : SB30B.35719**
Amount of Each Disbursement this Period: 1083.84

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3220.15

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

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

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Kenneth Kimber
Mailing Address: 2217 Boysenberry Lane
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Reimbursed expense-B
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 02 / 2014
Transaction ID : SB30B.35602
Amount of Each Disbursement this Period: 25.00

**B.** Full Name (Last, First, Middle Initial): Kenneth Kimber
Mailing Address: 2217 Boysenberry Lane
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
Transaction ID : SB30B.35732
Amount of Each Disbursement this Period: 1274.22

**C.** Full Name (Last, First, Middle Initial): Daniel Klein
Mailing Address: 1824 S. Halstead
City: Chicago State: IL Zip Code: 60608
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 04 / 2014
Transaction ID : SB30B.35611
Amount of Each Disbursement this Period: 1001.64

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2300.86

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

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

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Daniel Klein
Mailing Address: 1824 S. Halstead
City: Chicago State: IL Zip Code: 60608
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
**Transaction ID : SB30B.35669**
Amount of Each Disbursement this Period: 1083.83

**B.** Full Name (Last, First, Middle Initial): Brian Koppe
Mailing Address: 265 Rosewood Avenue
City: Buffalo Grove State: IL Zip Code: 60089
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
**Transaction ID : SB30B.35681**
Amount of Each Disbursement this Period: 1083.84

**C.** Full Name (Last, First, Middle Initial): Ben Lenet
Mailing Address: 1547 W. Blackhawk Avenue
City: Chicago State: IL Zip Code: 60642
Purpose of Disbursement: Insurance reimbursement
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
**Transaction ID : SB30B.35650**
Amount of Each Disbursement this Period: 323.93

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2491.60

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

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

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Ben Lenet
Mailing Address: 1547 W. Blackhawk Avenue
City: Chicago State: IL Zip Code: 60642
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35751
Amount of Each Disbursement this Period: 2534.21

**B.** Full Name (Last, First, Middle Initial): Benjamin Levin
Mailing Address: 127 Chargeur Road
City: Reisterstown State: MD Zip Code: 21136
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35705
Amount of Each Disbursement this Period: 1083.83

**C.** Full Name (Last, First, Middle Initial): Seth Levin
Mailing Address: 127 Chargeur Road
City: Reisterstown State: MD Zip Code: 21136
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35706
Amount of Each Disbursement this Period: 1454.62

**SUBTOTAL** of Disbursements This Page (optional) ▶ 5072.66

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): MailChip
Mailing Address: 512 Means Street
City: Atlanta State: GA Zip Code: 30318
Purpose of Disbursement: B-Email size update to send unlimited emails
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 09 / 30 / 2014
**Transaction ID : SB30B.35603**
Amount of Each Disbursement this Period: 25.00
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial): Christopher Maley
Mailing Address: 2517 W. Harbauer Lane
City: Springfield State: IL Zip Code: 62702
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35738**
Amount of Each Disbursement this Period: 2927.33

**C.** Full Name (Last, First, Middle Initial): Jonathan Maxson
Mailing Address: 400 E. Jefferson
City: Springfield State: IL Zip Code: 62701
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35746**
Amount of Each Disbursement this Period: 1462.69

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4390.02

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Sean McConnell
Mailing Address: 4812 Bears Parkway
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35740
Amount of Each Disbursement this Period: 1222.90

**B.** Full Name (Last, First, Middle Initial): Anna McGreal
Mailing Address: 1717 W. 102nd Street
City: Chicago State: IL Zip Code: 60643
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35682
Amount of Each Disbursement this Period: 1112.95

**C.** Full Name (Last, First, Middle Initial): David Mehundrew
Mailing Address: 121 Glen Aire Drive
City: Springfield State: IL Zip Code: 62703
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35747
Amount of Each Disbursement this Period: 1388.24

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3724.09

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Edward Miller
Mailing Address: 57 North Beacon Street
City: Hartford State: CT Zip Code: 06105
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35692**
Amount of Each Disbursement this Period: 1955.93

**B.** Full Name (Last, First, Middle Initial): Max Miller
Mailing Address: 915 South 6th Avenue
City: LaGrange State: IL Zip Code: 60525
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35663**
Amount of Each Disbursement this Period: 1108.52

**C.** Full Name (Last, First, Middle Initial): Solomon Miller
Mailing Address: 1640 Maple Avenue
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35720**
Amount of Each Disbursement this Period: 1083.83

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4148.28

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Mission Control
Mailing Address: 114A Mansfield Hollow Road
City: Mansfield Center State: CT Zip Code: 06250
Purpose of Disbursement: Printing slate cards
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 14 / 2014
**Transaction ID : SB30B.35764**
Amount of Each Disbursement this Period: 5698.00

**B.** Full Name (Last, First, Middle Initial): Shahdi Montazeri
Mailing Address: 20950 Norman Shores
City: Cornelius State: NC Zip Code: 28031
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35707**
Amount of Each Disbursement this Period: 1112.95

**C.** Full Name (Last, First, Middle Initial): Fernando Montoya
Mailing Address: 1600 Whittier Lane
City: Wheaton State: IL Zip Code: 60189
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35708**
Amount of Each Disbursement this Period: 1083.84

**SUBTOTAL** of Disbursements This Page (optional) ▶ 7894.79

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Felicia Moore
Mailing Address: 420 S. Durkin Drive
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35709
Amount of Each Disbursement this Period: 1166.20

**B.** Full Name (Last, First, Middle Initial): Alexander Morgan
Mailing Address: 725 St. Johns Avenue
City: Highland Park State: IL Zip Code: 60035
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35683
Amount of Each Disbursement this Period: 1454.62

**C.** Full Name (Last, First, Middle Initial): Andrew Mossman
Mailing Address: 411 Wynona Road
City: Edwardsville State: IL Zip Code: 62025
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35693
Amount of Each Disbursement this Period: 1268.75

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3889.57

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Russell Nagel
Mailing Address: 529 S. Glenwood Avenue
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35748
Amount of Each Disbursement this Period: 2709.19

**B.** Full Name (Last, First, Middle Initial): Cassandra Nerby
Mailing Address: 25 Timba Bah
City: Atlantic City State: WY Zip Code: 82520
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35721
Amount of Each Disbursement this Period: 1083.34

**C.** Full Name (Last, First, Middle Initial): Jason Nippa
Mailing Address: 11411 Michican Drive
City: Spring Grove State: IL Zip Code: 60081
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35749
Amount of Each Disbursement this Period: 1248.41

**SUBTOTAL** of Disbursements This Page (optional) ▶ 5040.94

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Ryanne Olsen
Mailing Address: 117 E. Dodge Street
City: Jefferson State: WI Zip Code: 53549
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35684
Amount of Each Disbursement this Period: 1413.48

**B.** Full Name (Last, First, Middle Initial): Erik Pannell
Mailing Address: 953 Goetz Drive
City: East Saint Louis State: IL Zip Code: 62203
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35694
Amount of Each Disbursement this Period: 1171.20

**C.** Full Name (Last, First, Middle Initial): Penske Truck Rental
Mailing Address: 311 E. Walnut Street
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: C-Truck rental
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 08/27/2014
Transaction ID : SB30B.35618
Amount of Each Disbursement this Period: 718.10
[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ▶ 2584.68

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Penske Truck Rental
Mailing Address: 311 E. Walnut Street
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: C-Truck rental
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 09 / 10 / 2014
Transaction ID : SB30B.35620
Amount of Each Disbursement this Period: 722.60
[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial): Penske Truck Rental
Mailing Address: 311 E. Walnut Street
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: C-Truck rental
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 09 / 17 / 2014
Transaction ID : SB30B.35621
Amount of Each Disbursement this Period: 720.10
[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial): Penske Truck Rental
Mailing Address: 311 E. Walnut Street
City: Chatham State: IL Zip Code: 62629
Purpose of Disbursement: C-Truck rental
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 09 / 24 / 2014
Transaction ID : SB30B.35622
Amount of Each Disbursement this Period: 720.10
[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ▶ 0.00

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Pivot Group, Inc.
Mailing Address: 1720 I Street SW, Suite 550
City: Washington State: DC Zip Code: 20006
Purpose of Disbursement: Bustos and Calls mail
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/02/2014
**Transaction ID : SB30B.35605**
Amount of Each Disbursement this Period: 61213.12

**B.** Full Name (Last, First, Middle Initial): Pivot Group, Inc.
Mailing Address: 1720 I Street SW, Suite 550
City: Washington State: DC Zip Code: 20006
Purpose of Disbursement: Bustos and Callis mail
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/03/2014
**Transaction ID : SB30B.35608**
Amount of Each Disbursement this Period: 96015.67

**C.** Full Name (Last, First, Middle Initial): Pivot Group, Inc.
Mailing Address: 1720 I Street SW, Suite 550
City: Washington State: DC Zip Code: 20006
Purpose of Disbursement: Callis production and postage
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/07/2014
**Transaction ID : SB30B.35612**
Amount of Each Disbursement this Period: 10071.89

**SUBTOTAL** of Disbursements This Page (optional) ▶ 167300.68

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Pivot Group, Inc.
Mailing Address: 1720 I Street SW, Suite 550
City: Washington State: DC Zip Code: 20006
Purpose of Disbursement: Printing slate cards
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 14 / 2014
**Transaction ID : SB30B.35765**
Amount of Each Disbursement this Period: 5300.00

**B.** Full Name (Last, First, Middle Initial): Kathryn Pond
Mailing Address: 449 19th Street NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35723**
Amount of Each Disbursement this Period: 1083.84

**C.** Full Name (Last, First, Middle Initial): Scott Redenbaugh
Mailing Address: 611 W. Church
City: Champaign State: IL Zip Code: 61820
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35710**
Amount of Each Disbursement this Period: 1413.48

**SUBTOTAL** of Disbursements This Page (optional) ▶ 7797.32

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

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

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21b 22 23 24 25 26
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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Megan Reenock
Mailing Address: 624 E. 9th Street
City: Northhampton State: PA Zip Code: 18067
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35664**
Amount of Each Disbursement this Period: 1083.84

**B.** Full Name (Last, First, Middle Initial): Jackson Reid
Mailing Address: 136 W. Glenlake Avenue
City: Roselle State: IL Zip Code: 60172
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35685**
Amount of Each Disbursement this Period: 1083.84

**C.** Full Name (Last, First, Middle Initial): Lyndsey Reller
Mailing Address: 313 S. Fillmore
City: Edwardsville State: IL Zip Code: 62025
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35695**
Amount of Each Disbursement this Period: 1112.96

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3280.64

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

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

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Janay Richmond
Mailing Address: 4104 Indian Hill Drive
City: Country Club Hills State: IL Zip Code: 60478
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35686**
Amount of Each Disbursement this Period: 1157.91

**B.** Full Name (Last, First, Middle Initial): Kate Robbins
Mailing Address: 923 W. Main Street
City: Belleville State: IL Zip Code: 62222
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35696**
Amount of Each Disbursement this Period: 1881.10

**C.** Full Name (Last, First, Middle Initial): Thomas Rothe
Mailing Address: 5106 Woodle Ranch Lane
City: Rockford State: IL Zip Code: 61114
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35724**
Amount of Each Disbursement this Period: 1083.84

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4122.85

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

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

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Royal Performance
Mailing Address: 2100 Western
City: Lisle State: IL Zip Code: 60653
Purpose of Disbursement: Gasoline cards
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 14 / 2014
**Transaction ID : SB30B.35763**
Amount of Each Disbursement this Period: 4272.50

**B.** Full Name (Last, First, Middle Initial): Bradley Ruppert
Mailing Address: 209 N. Lark Lane
City: Carbondale State: IL Zip Code: 62901
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35666**
Amount of Each Disbursement this Period: 1083.83

**C.** Full Name (Last, First, Middle Initial): Jeff Schuette
Mailing Address: 420 W. Edwards
City: Springfield State: IL Zip Code: 62704
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35750**
Amount of Each Disbursement this Period: 1300.21

**SUBTOTAL** of Disbursements This Page (optional) ▶ 6656.54

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Christopher Shallow
Mailing Address: 8530 S. Michigan Avenue
City: Chicago State: IL Zip Code: 60619
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35725**
Amount of Each Disbursement this Period: 1972.25

**B.** Full Name (Last, First, Middle Initial): Michelle Shui
Mailing Address: 1468 Holbrook Lane
City: Batavia State: IL Zip Code: 60510
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35726**
Amount of Each Disbursement this Period: 1083.83

**C.** Full Name (Last, First, Middle Initial): Springhill Suites
Mailing Address: 43050 Weaver Road
City: Warrenville State: IL Zip Code: 60555
Purpose of Disbursement: C-Travel for meeting
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 09 / 24 / 2014
**Transaction ID : SB30B.35616**
Amount of Each Disbursement this Period: 165.39
**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3056.08

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Justin Steele
Mailing Address: 2814 Iowa Drive
City: Fort Collins State: CO Zip Code: 80525
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35687**
Amount of Each Disbursement this Period: 1922.24

**B.** Full Name (Last, First, Middle Initial): Hannah Stonebraker
Mailing Address: 920 Bluff Street
City: Glencoe State: IL Zip Code: 60022
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35689**
Amount of Each Disbursement this Period: 1112.95

**C.** Full Name (Last, First, Middle Initial): Stephanie Sullivan
Mailing Address: 1832 N. 19th Street
City: Springfield State: IL Zip Code: 62702
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
**Transaction ID : SB30B.35739**
Amount of Each Disbursement this Period: 1300.21

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4335.40

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



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NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Terra Strategies, LLC
Mailing Address: 100 East Grand, Suite 380
City: Des Moines State: IA Zip Code: 50309
Purpose of Disbursement: Canvass-Schneider, Enyart, Bustos
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 07 / 2014
**Transaction ID : SB30B.35634**
Amount of Each Disbursement this Period: 299904.00

**B.** Full Name (Last, First, Middle Initial): The Strategy Group, Inc.
Mailing Address: 1603 Orrington Avenue Suite 1730
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Enyart Production and postage
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 02 / 2014
**Transaction ID : SB30B.35607**
Amount of Each Disbursement this Period: 66854.20

**C.** Full Name (Last, First, Middle Initial): The Strategy Group, Inc.
Mailing Address: 1603 Orrington Avenue Suite 1730
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Printing and Production-Enyart
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 14 / 2014
**Transaction ID : SB30B.35766**
Amount of Each Disbursement this Period: 75628.25

**SUBTOTAL** of Disbursements This Page (optional) ▶ 442386.45

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): The Strategy Group, Inc.
Mailing Address: 1603 Orrington Avenue, Suite 1730
City: Evanston State: IL Zip Code: 60201
Purpose of Disbursement: Printing and production
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 14 / 2014
Transaction ID : SB30B.35769
Amount of Each Disbursement this Period: 25237.75

**B.** Full Name (Last, First, Middle Initial): Thinkstock
Mailing Address: P.O. Box 953604
City: St. Louis State: MO Zip Code: 63195
Purpose of Disbursement: C-mail
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 09 / 02 / 2014
Transaction ID : SB30B.35615
Amount of Each Disbursement this Period: 222.58
[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial): James Tinsley
Mailing Address: 1304 W. Beardsley
City: Urbana State: IL Zip Code: 61801
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
Transaction ID : SB30B.35711
Amount of Each Disbursement this Period: 1083.84

**SUBTOTAL** of Disbursements This Page (optional) ▶ 26321.59

**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

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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Blaine Tisdale
Mailing Address: 1110 Ravinia Court
City: Shorewood State: IL Zip Code: 60404
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
Transaction ID : SB30B.35697
Amount of Each Disbursement this Period: 1083.84

**B.** Full Name (Last, First, Middle Initial): Ryan Vickers
Mailing Address: 207 Laurel Drive
City: Fairview Heights State: IL Zip Code: 62208
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
Transaction ID : SB30B.35698
Amount of Each Disbursement this Period: 1080.85

**C.** Full Name (Last, First, Middle Initial): Edward Visel
Mailing Address: 1835 Bay Street SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 10 / 2014
Transaction ID : SB30B.35727
Amount of Each Disbursement this Period: 1503.84

**SUBTOTAL** of Disbursements This Page (optional) ▶ 3668.53

**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



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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial): Ryan Winter
Mailing Address: 1769 Lucky Debonair Court
City: Wheaton State: IL Zip Code: 60189
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35712
Amount of Each Disbursement this Period: 1770.78

**B.** Full Name (Last, First, Middle Initial): Alyssa Zavislak
Mailing Address: 1551 S. Lloyd
City: Lombard State: IL Zip Code: 60148
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35662
Amount of Each Disbursement this Period: 1413.48

**C.** Full Name (Last, First, Middle Initial): Julian Zito
Mailing Address: 400 W. College Apt 1
City: Carbondale State: IL Zip Code: 62901
Purpose of Disbursement: Wages
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10/10/2014
Transaction ID : SB30B.35699
Amount of Each Disbursement this Period: 1142.08

**SUBTOTAL** of Disbursements This Page (optional) ▶ 4326.34

**TOTAL** This Period (last page this line number only) ▶ 858037.57

# 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)
DEMOCRATIC PARTY OF ILLINOIS

| NAME OF ACCOUNT | DATE OF RECEIPT | TOTAL AMOUNT TRANSFERRED |
|---|---|---|
| DEMOCRATIC PARTY OF ILLINOIS | MM 10 / DD 02 / YYYY 2014 | 30713.68 |

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative** ..... 30713.68

**Transaction ID : H3.36149**

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) ..... 30713.68

**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) ..... 30713.68

# SCHEDULE H4 (FEC Form 3X)

## DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY



FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35629**
Palmer House Hilton
Mailing Address 17 East Monroe Street
City: Chicago State: IL Zip Code: 60603
Purpose of Disbursement: D-Lodging for meeting
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: 205737.08
Date: 07 / 24 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 53.42 | | 200.96 | | 254.38 |

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35630**
Lake and Wellls Parking
Mailing Address 177 N. Wells
City: Chicago State: IL Zip Code: 60601
Purpose of Disbursement: D-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: 225955.90
Date: 07 / 30 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 3.36 | | 12.64 | | 16.00 |

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35625**
Potbelly
Mailing Address 508 N. Clark Street
City: Chicago State: IL Zip Code: 60654
Purpose of Disbursement: D-Lunch meeting
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: 284203.09
Date: 08 / 22 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 2.60 | | 9.78 | | 12.38 |

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35628**
Hotel Allegro
Mailing Address 171 W. Randolph
City: Chicago State: IL Zip Code: 60601
Purpose of Disbursement: D-Lodging for meeting
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: 284203.09
Date: 08/23/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 44.80 | | 168.51 | | 213.31 |

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35627**
Lake and Wellls Parking
Mailing Address 177 N. Wells
City: Chicago State: IL Zip Code: 60601
Purpose of Disbursement: D-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: 359816.05
Date: 09/23/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 3.36 | | 12.64 | | 16.00 |

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35594**
Master Valet Parking
Mailing Address 7659 W. Sunset Drive
City: Elmwood Park State: IL Zip Code: 60707
Purpose of Disbursement: A-Parking for fundraiser
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: 373575.97
Date: 09/29/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 4.62 | | 17.38 | | 22.00 |

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35592**
Tim Mapes
Mailing Address 632 Old Tippercanoe
City: Springfield State: IL Zip Code: 62707
Purpose of Disbursement: Mileage reimbursement
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: 373803.97
Date: 10 / 01 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 47.88 | | 180.12 | | 228.00 |

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35593**
Tim Mapes
Mailing Address 632 Old Tippercanoe
City: Springfield State: IL Zip Code: 62707
Purpose of Disbursement: Reimbursements-A
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: 373825.97
Date: 10 / 01 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 4.62 | | 17.38 | | 22.00 |

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35596**
Powerplay Properties
Mailing Address 1201 Veterans Parkway
City: Springfield State: IL Zip Code: 62707
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: 374104.53
Date: 10 / 01 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 58.50 | | 220.06 | | 278.56 |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 111.00 | | 417.56 | | 528.56 |

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35597**
Kenny and Kenny, P.C.
Mailing Address 1400 W. 47th Street
City: La Grange State: IL Zip Code: 60525
Purpose of Disbursement: Bookkeeping 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: 375119.53
Date: 10 / 01 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 213.15 | | 801.85 | | 1015.00 |

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35609**
ADP
Mailing Address P.O. Box 842854
City: Boston State: MA Zip Code: 02284
Purpose of Disbursement: Payroll fee
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: 375437.95
Date: 10 / 03 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 66.87 | | 251.55 | | 318.42 |

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35610**
ATT-Carol Stream
Mailing Address P.O. Box 5080
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone
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: 376311.23
Date: 10 / 04 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 183.39 | | 689.89 | | 873.28 |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 463.41 | | 1743.29 | | 2206.70 |

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35631**
CDW Direct
Mailing Address 200 North Milwaukee
City: Vernon Hills State: IL Zip Code: 60061
Purpose of Disbursement: Printers
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: 383277.56
Date: 10 / 06 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 1462.93 | | 5503.40 | | 6966.33 |

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35624**
Citi Cards
Mailing Address Processing Center
P.O. Box 688901
City: Des Moines State: IA Zip Code: 50363
Purpose of Disbursement: SEE CREDIT CARD BREAKDOWN-D
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: 383789.63
Date: 10 / 07 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 107.53 | | 404.54 | | 512.07 |

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35659**
Emily Wurth
Mailing Address 2267 Boysenberry Lane
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Insurance spent <25% on FEA
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: 384141.77
Date: 10 / 10 / 2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 73.95 | | 278.19 | | 352.14 |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 1644.41 | | 6186.13 | | 7830.54 |

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35730**
Sarah Nelson
Mailing Address 655 W. Irving Park Road
Apt. 5015
City: Chicago State: IL Zip Code: 60613
Purpose of Disbursement: Wages spent < 25% on FEA
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: 385636.84
Date: 10/10/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 313.96 | | 1181.11 | | 1495.07 |

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35741**
Tim Mapes
Mailing Address 632 Old Tippercanoe
City: Springfield State: IL Zip Code: 62707
Purpose of Disbursement: Wages spent < 25% on FEA
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: 392151.72
Date: 10/10/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 1368.12 | | 5146.76 | | 6514.88 |

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35742**
Kathy Murray
Mailing Address 500 Wingate Drive
City: Sherman State: IL Zip Code: 62684
Purpose of Disbursement: Wages spent < 25% on FEA
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: 393880.59
Date: 10/10/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 363.06 | | 1365.81 | | 1728.87 |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 2045.14 | | 7693.68 | | 9738.82 |

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35752**
Emily Wurth
Mailing Address 2267 Boysenberry Lane
City: Springfield State: IL Zip Code: 62711
Purpose of Disbursement: Wages spent < 25% on FEA
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: 396861.93
Date: 10/10/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 626.08 | | 2355.26 | | 2981.34 |

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.36224**
Internal Revenue Service
Mailing Address Department of the Treasury
City: Kansas City State: MO Zip Code: 64999
Purpose of Disbursement: Payroll taxes spent < 25% on FEA
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: 397802.67
Date: 10/10/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 197.56 | | 743.18 | | 940.74 |

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35753**
ATT-Carol Stream
Mailing Address P.O. Box 5080
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone
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: 398083.51
Date: 10/11/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 58.98 | | 221.86 | | 280.84 |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 882.62 | | 3320.30 | | 4202.92 |

**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)
DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35754**
Perkins Coie
Mailing Address 607 Fourteenth Street N.W.
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement: Legal
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: 413870.51
Date: 10/11/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 3315.27 | | 12471.73 | | 15787.00 |

**B.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35755**
ATT-Carol Stream
Mailing Address P.O. Box 5080
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Telephone
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: 413915.51
Date: 10/11/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 9.45 | | 35.55 | | 45.00 |

**C.** Full Name (Last, First, Middle Initial) **Transaction ID : H4.35762**
Sheraton Chicago Hotel and Towers
Mailing Address 301 East North Water Street
City: Chicago State: IL Zip Code: 60611
Purpose of Disbursement: Hall for fundraiser
Activity or Event Identifier: 09-23-14 Fall Event(09/23/2014)
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: 194395.01
Date: 10/14/2014

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 7528.26 | | 28320.60 | | 35848.86 |

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 10852.98 | | 40827.88 | | 51680.86 |

**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 |
|---|---|---|
| 15999.56 | 60188.84 | 76188.40 |

Image# 14952544563

# SCHEDULE H5 (FEC Form 3X)

## TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

**(To be used by State, District and Local Party Committees Only)**


FOR LINE 18b OF FORM 3X

NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

| NAME OF ACCOUNT | DATE OF RECEIPT (M M / D D / Y Y Y Y) | TOTAL AMOUNT TRANSFERRED |
|---|---|---|
| Democratic Party of IL Non Federal | 10 / 01 / 2014 | 782902.46 |

**Transaction ID : H5.35802**

BREAKDOWN OF THIS TRANSFER

| | | |
|---|---|---|
| **i) Voter Registration** Total Amount Transferred for Voter Registration..... | VOTER REGISTRATION | 0.00 |
| **ii) Voter ID** Total Amount Transferred for Voter ID ..... | VOTER ID | 0.00 |
| **iii) GOTV** Total Amount Transferred for GOTV ..... | GOTV | 0.00 |
| **iv) Generic Campaign Activity** Total Amount Transferred for Generic Campaign Activity ..... | GENERIC CAMPAIGN ACTIVITY | 782902.46 |

| NAME OF ACCOUNT | DATE OF RECEIPT (M M / D D / Y Y Y Y) | TOTAL AMOUNT TRANSFERRED |
|---|---|---|
| | | |

BREAKDOWN OF THIS TRANSFER

| | | |
|---|---|---|
| **i) Voter Registration** Total Amount Transferred for Voter Registration..... | VOTER REGISTRATION | |
| **ii) Voter ID** Total Amount Transferred for Voter ID ..... | VOTER ID | |
| **iii) GOTV** Total Amount Transferred for GOTV ..... | GOTV | |
| **iv) Generic Campaign Activity** Total Amount Transferred for Generic Campaign Activity ..... | GENERIC CAMPAIGN ACTIVITY | |

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)**

| | |
|---|---|
| **TOTAL** This Period (Voter Registration)..... | 0.00 |
| **TOTAL** This Period (Voter ID) ..... | 0.00 |
| **TOTAL** This Period (GOTV)..... | 0.00 |
| **TOTAL** This Period (Generic Campaign Activity)..... | 782902.46 |
| **TOTAL** This Period (Total Amount of Transfers Received)..... | 782902.46 |

Image# 14952544564

# SCHEDULE H6 (FEC Form 3X)
# DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY
**(To be used by State, District and Local Party Committees Only)**



FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-Edwardsville

**Transaction ID : H6.35600**

Mailing Address 132 N. Kansas

City: Edwardsville | State: IL | Zip Code: 62025

Purpose of Disbursement: Postage

Category/Type:

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 992605.77

Date: 10 / 02 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 315.00 | | 1185.00 | | 1500.00 |

B. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-Rock Island

**Transaction ID : H6.35601**

Mailing Address 2633 11th Street

City: Rock Island | State: IL | Zip Code: 61201

Purpose of Disbursement: Postage

Category/Type:

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 994105.77

Date: 10 / 02 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 315.00 | | 1185.00 | | 1500.00 |

C. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-Belleville

**Transaction ID : H6.35633**

Mailing Address 120 W. Washington Street

City: Belleville | State: IL | Zip Code: 62220

Purpose of Disbursement: Postage

Category/Type:

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 996105.77

Date: 10 / 07 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 420.00 | | 1580.00 | | 2000.00 |

**SUBTOTAL** of Shared Federal and Levin Activity This Page

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 1050.00 | | 3950.00 | | 5000.00 |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

| FEDERAL SHARE | | TOTAL AMOUNT |
|---|---|---|
| | LEVIN SHARE | |

**TOTAL** This Period for the Levin Share

Image# 14952544565

# SCHEDULE H6 (FEC Form 3X)
# DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY
**(To be used by State, District and Local Party Committees Only)**



FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-Champaign

**Transaction ID : H6.35636**

Mailing Address 2001 N. Mattis Avenue

City: Champaign | State: IL | Zip Code: 61821

Purpose of Disbursement: Postage

Category/Type:

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 996505.77

Date: 10 / 08 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 84.00 | | 316.00 | | 400.00 |

B. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-Edwardsville

**Transaction ID : H6.35637**

Mailing Address 132 N. Kansas

City: Edwardsville | State: IL | Zip Code: 62025

Purpose of Disbursement: Postage

Category/Type:

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 997105.77

Date: 10 / 08 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 126.00 | | 474.00 | | 600.00 |

C. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-Peoria

**Transaction ID : H6.35638**

Mailing Address 95 State Street

City: Peoria | State: IL | Zip Code: 61601

Purpose of Disbursement: Postage

Category/Type:

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 997605.77

Date: 10 / 08 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 105.00 | | 395.00 | | 500.00 |

**SUBTOTAL** of Shared Federal and Levin Activity This Page

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 315.00 | | 1185.00 | | 1500.00 |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

TOTAL AMOUNT

LEVIN SHARE

**TOTAL** This Period for the Levin Share

Image# 14952544566

# SCHEDULE H6 (FEC Form 3X)
# DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY
**(To be used by State, District and Local Party Committees Only)**



FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-Rockford

**Transaction ID : H6.35639**

Mailing Address 5225 Harrison Avenue

City: Rockford | State: IL | Zip Code: 61125

Purpose of Disbursement: Postage

Category/Type:

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 998355.77

Date: 10 / 08 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 157.50 | | 592.50 | | 750.00 |

B. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-Rock Island

**Transaction ID : H6.36222**

Mailing Address 2633 11th Street

City: Rock Island | State: IL | Zip Code: 61201

Purpose of Disbursement: Postage

Category/Type:

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 1000355.77

Date: 10 / 08 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 420.00 | | 1580.00 | | 2000.00 |

C. Full Name (Last, First, Middle Initial) / Full Organization Name
The Strategy Group, Inc.

**Transaction ID : H6.35643**

Mailing Address 1603 Orrington Avenue
Suite 1730

City: Evanston | State: IL | Zip Code: 60201

Purpose of Disbursement: Vote by mail - printing and production

Category/Type:

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 1466206.88

Date: 10 / 09 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 97828.73 | | 368022.38 | | 465851.11 |

**SUBTOTAL** of Shared Federal and Levin Activity This Page

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 98406.23 | | 370194.88 | | 468601.11 |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

| FEDERAL SHARE | | TOTAL AMOUNT |
|---|---|---|
| | LEVIN SHARE | |

**TOTAL** This Period for the Levin Share

# SCHEDULE H6 (FEC Form 3X)
# DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY
**(To be used by State, District and Local Party Committees Only)**



FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-East St. Louis

**Transaction ID : H6.35757**

Mailing Address 950 Missouri Avenue

City: East St. Louis | State: IL | Zip Code: 62201

Purpose of Disbursement: Postage

Category/Type

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 1466806.88

Date: 10 / 11 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 126.00 | | 474.00 | | 600.00 |

B. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-Peoria

**Transaction ID : H6.35758**

Mailing Address 95 State Street

City: Peoria | State: IL | Zip Code: 61601

Purpose of Disbursement: Postage

Category/Type

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 1467306.88

Date: 10 / 11 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 105.00 | | 395.00 | | 500.00 |

C. Full Name (Last, First, Middle Initial) / Full Organization Name
US Postmaster-Rockford

**Transaction ID : H6.35759**

Mailing Address 5225 Harrison Avenue

City: Rockford | State: IL | Zip Code: 61125

Purpose of Disbursement: Postage

Category/Type

Type of Allocated Activity or Event:
- [ ] Voter Registration
- [ ] Voter ID
- [ ] GOTV
- [x] Generic Campaign

Allocated Activity or Event Year-To-Date: 1467806.88

Date: 10 / 11 / 2014

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 105.00 | | 395.00 | | 500.00 |

**SUBTOTAL** of Shared Federal and Levin Activity This Page

| FEDERAL SHARE | + | LEVIN SHARE | = | TOTAL AMOUNT |
|---|---|---|---|---|
| 336.00 | | 1264.00 | | 1600.00 |

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

| FEDERAL SHARE | LEVIN SHARE | TOTAL AMOUNT |
|---|---|---|
| 100107.23 | | 476701.11 |

**TOTAL** This Period for the Levin Share: 376593.88

# SCHEDULE L (FEC Form 3X)
# AGGREGATION PAGE: LEVIN FUNDS

Transaction ID : SL.35803

NAME OF COMMITTEE (In Full)
DEMOCRATIC PARTY OF ILLINOIS

NAME OF ACCOUNT
Democratic Party of IL Non Federal

| | | COLUMN A TOTAL THIS PERIOD | COLUMN B YEAR-TO-DATE |
|---|---|---|---|
| 1. | RECEIPTS FROM PERSONS | | |
| | (a) Itemized (Use Schedule L–A) | 30000.00 | 30000.00 |
| | (b) Unitemized | 0.00 | 0.00 |
| | (c) Total | 30000.00 | 30000.00 |
| 2. | OTHER RECEIPTS | 907400.00 | 907400.00 |
| 3. | TOTAL RECEIPTS (Add Lines 1c and 2) | 937400.00 | 937400.00 |
| 4. | TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L–B) | | |
| | (a) Voter Registration | 0.00 | 0.00 |
| | (b) Voter ID | 0.00 | 0.00 |
| | (c) GOTV | 0.00 | 0.00 |
| | (d) Generic Campaign | 782902.46 | 782902.46 |
| | (e) Total | 782902.46 | 782902.46 |
| 5. | OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 6. | TOTAL DISBURSEMENTS (Add Lines 4e and 5) | 782902.46 | 782902.46 |
| 7. | BEGINNING CASH ON HAND (for Column B, use cash as of January 1st) | 0.00 | 0.00 |
| 8. | RECEIPTS (from Line 3) | 937400.00 | 937400.00 |
| 9. | SUBTOTAL (Add Lines 7 and 8) | 937400.00 | 937400.00 |
| 10. | DISBURSEMENTS (From Line 6) | 782902.46 | 782902.46 |
| 11. | ENDING CASH ON HAND (Subtract Line 10 From Line 9) | 154497.54 | 154497.54 |

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) [X] 1a [ ] 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Fred Eychaner

Account : 18789

Mailing Address: 1645 West Fullerton

City: Chicago State: IL Zip Code: 60614

Name of Employer or Principal Place of Business: Best efforts

Occupation: President

Date of Receipt: 05 / 21 / 2014

Transaction ID : SASL1A.35846

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Leo A. Smith

Account : 18789

Mailing Address: 5348 N. Lakewood Avenue

City: Chicago State: IL Zip Code: 60640-2209

Name of Employer or Principal Place of Business: Foundation Charter Prep

Occupation: Teacher

Date of Receipt: 05 / 18 / 2014

Transaction ID : SASL1A.35893

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Leo A. Smith

Account : 18789

Mailing Address: 5348 N. Lakewood Avenue

City: Chicago State: IL Zip Code: 60640-2209

Name of Employer or Principal Place of Business: Foundation Charter Prep

Occupation: Teacher

Date of Receipt: 05 / 18 / 2014

Transaction ID : SASL1A.35895

Amount of Each Receipt this Period: -10000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Leo A. Smith

Account : 18789

Mailing Address: 5348 N. Lakewood Avenue

City: Chicago State: IL Zip Code: 60640-2209

Name of Employer or Principal Place of Business: Foundation Charter Prep

Occupation: Teacher

Date of Receipt: 08 / 18 / 2014

Transaction ID : SASL1A.35896

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 20000.00

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

# SCHEDULE L–A (FEC Form 3X)
# ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) [X] 1a [ ] 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.**

Full Name (Last, First, Middle Initial) / Full Organization Name: Heather Stearns

**Account :** 18789

Mailing Address: 5348 N. Lakewood Avenue

City: Chicago | State: IL | Zip Code: 60640

Name of Employer or Principal Place of Business: IL General Assembly

Occupation: State Senator

Date of Receipt: 08 / 18 / 2014

**Transaction ID : SASL1A.35894**

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**B.**

Full Name (Last, First, Middle Initial) / Full Organization Name

**Account :**

Mailing Address

City | State | Zip Code

Name of Employer or Principal Place of Business

Occupation

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

Amount of Each Receipt this Period

Aggregate Year-to-Date

**C.**

Full Name (Last, First, Middle Initial) / Full Organization Name

Account :

Mailing Address

City | State | Zip Code

Name of Employer or Principal Place of Business

Occupation

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

Amount of Each Receipt this Period

Aggregate Year-to-Date

**D.**

Full Name (Last, First, Middle Initial) / Full Organization Name

Account :

Mailing Address

City | State | Zip Code

Name of Employer or Principal Place of Business

Occupation

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

Amount of Each Receipt this Period

Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 10000.00

**TOTAL** This Period (last page this line number only) ▶ 30000.00

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: 1528 Partners, LP

Account : 18789

Mailing Address: 1541 N. Wells Street

City: Chicago | State: IL | Zip Code: 60610

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 03 / 06 / 2014

Transaction ID : SASL2.35822

Amount of Each Receipt this Period: 3300.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Administrative District Council 1 of Illinois

Account : 18789

Mailing Address: 660 N. Industrial Drive

City: Elmhurst | State: IL | Zip Code: 60126

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 13 / 2014

Transaction ID : SASL2.36010

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Albert F. Hofeld, Ltd. Inc.

Account : 18789

Mailing Address: 30 North LaSalle Street

City: Chicago | State: IL | Zip Code: 60602

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 21 / 2014

Transaction ID : SASL2.35897

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Allen N. Schwartz, Ltd.

Account : 18789

Mailing Address: 60 West Randolph Street

City: Chicago | State: IL | Zip Code: 60601

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36074

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 24300.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Alliance for Living, NFP
**Account :** 18789
Mailing Address 1 Northfield Plaza
City: Northfield State: IL Zip Code: 60093
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 03 / 06 / 2014
**Transaction ID : SASL2.35824**
Amount of Each Receipt this Period: 3300.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Alliance for Living, NFP
**Account :** 18789
Mailing Address 1 Northfield Plaza
City: Northfield State: IL Zip Code: 60093
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 03 / 06 / 2014
**Transaction ID : SASL2.35825**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Ameren Illinois
Account : 18789
Mailing Address P.O. Box 66892
City: St. Louis State: MO Zip Code: 63166
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 21 / 2014
**Transaction ID : SASL2.35899**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
American Council of IL Engineering Companies PAC
Account : 18789
Mailing Address 5221 S. 6th Street
City: Springfield State: IL Zip Code: 62703
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
**Transaction ID : SASL2.35860**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 15300.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Anheuser-Bush Cos., Inc.
Account : 18789
Mailing Address: One Busch Place
City: St. Louis State: MO Zip Code: 63118
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 07 / 30 / 2014
Transaction ID : SASL2.35859
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Arlington Park Race Course
Account : 18789
Mailing Address: 2200 West Euclid Avenue
City: Arlington Heights State: IL Zip Code: 60006
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
Transaction ID : SASL2.35958
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Associated Beer Distributors PAC
Account : 18789
Mailing Address: P.O. Box 396
City: Springfield State: IL Zip Code: 62705
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 21 / 2014
Transaction ID : SASL2.35901
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Association Management Resources
Account : 18789
Mailing Address: 1151 East Warrenville Road
City: Naperville State: IL Zip Code: 60563
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 02 / 2014
Transaction ID : SASL2.35952
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 40000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: AT & T Services, Inc.

Account : 18789

Mailing Address: 225 West Randolph

City: Chicago | State: IL | Zip Code: 60606

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 21 / 2014

Transaction ID : SASL2.35902

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Azavar Technologies

Account : 18789

Mailing Address: 234 South Wabash Avenue

City: Chicago | State: IL | Zip Code: 60604

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 16 / 2014

Transaction ID : SASL2.36046

Amount of Each Receipt this Period: 8500.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: B & D Hotel Corporation

Account : 18789

Mailing Address: 321 N. Central Avenue

City: Chicago | State: IL | Zip Code: 60644

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 03 / 06 / 2014

Transaction ID : SASL2.35826

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Blatt, Hasenmiller,Leibsker & Moore LLC

Account : 18789

Mailing Address: 125 S. Wacker Drive

City: Chicago | State: IL | Zip Code: 60606

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 20 / 2014

Transaction ID : SASL2.36113

Amount of Each Receipt this Period: 2000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 21500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Blitt & Gaines, P.C.
**Account :** 18789
Mailing Address 661 Glenn Avenue
City: Wheeling State: IL Zip Code: 60090
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36115**
Amount of Each Receipt this Period: 2000.00
Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Boilermakers-Blacksmith Local 1 PAC
**Account :** 18789
Mailing Address 2941 South Archer Avenue
City: Chicago State: IL Zip Code: 60608
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 08 / 29 / 2014
**Transaction ID : SASL2.35932**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Brandon Phelps for State Representative
Account : 18789
Mailing Address P.O. Box 401
City: Harrisburg State: IL Zip Code: 62946
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 09 / 17 / 2014
**Transaction ID : SASL2.36069**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Cable Television and Communications Assn PAC
Account : 18789
Mailing Address P.O. Box 20098
City: Springfield State: IL Zip Code: 62708
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 09 / 14 / 2014
**Transaction ID : SASL2.36033**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 27000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Car Max Auto Superstores, Inc.

Account : 18789

Mailing Address: 12800 Tuckahoe Creek Parkway

City: Richmond | State: VA | Zip Code: 23238

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 14 / 2014

Transaction ID : SASL2.35864

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Car of Illinois

Account : 18789

Mailing Address: P.O. Box 3045

City: Springfield | State: IL | Zip Code: 62708

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 20 / 2014

Transaction ID : SASL2.36117

Amount of Each Receipt this Period: 1500.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Chicago & Cook County Building & Construction Trades PAC

Account : 18789

Mailing Address: 150 N. Wacker Drive

City: Chicago | State: IL | Zip Code: 60606

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 21 / 2014

Transaction ID : SASL2.35904

Amount of Each Receipt this Period: 2500.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Chicago Federation of Labor & IUC Political Fund

Account : 18789

Mailing Address: 130 E. Randolph

City: Chicago | State: IL | Zip Code: 60601

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 01 / 20 / 2014

Transaction ID : SASL2.35805

Amount of Each Receipt this Period: 7600.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 12600.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Chicago Fire Fighters Union Local 2 PCF
**Account :** 18789
Mailing Address 440 West 43rd Street
City: Chicago State: IL Zip Code: 60609
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 09 / 13 / 2014
**Transaction ID : SASL2.36012**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Chicago Journeymen Plumbers 130 Pol. Fund
**Account :** 18789
Mailing Address 1340 West Washington
City: Chicago State: IL Zip Code: 60607
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 09 / 09 / 2014
**Transaction ID : SASL2.36000**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Chicagoland Apartment Association PAC
Account : 18789
Mailing Address 557 W. Randolph
City: Chicago State: IL Zip Code: 60661
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36120**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Chicago Teachers Union PAC
Account : 18789
Mailing Address 222 Merchandise Mart Plaza
City: Chicago State: IL Zip Code: 60654
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36119**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 21000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Beiser

Account : 18789

Mailing Address: 2206 Krug Place

City: Alton | State: IL | Zip Code: 62002

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 17 / 2014

Transaction ID : SASL2.36055

Amount of Each Receipt this Period: 8000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Cynthia Soto

Account : 18789

Mailing Address: 4801 West Peterson

City: Chicago | State: IL | Zip Code: 60646

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 13 / 2014

Transaction ID : SASL2.36020

Amount of Each Receipt this Period: 2000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Edward Acevedo

Account : 18789

Mailing Address: 2334 W. 23rd Place

City: Chicago | State: IL | Zip Code: 60608

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36073

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Elaine Nekritz

Account : 18789

Mailing Address: The Court of Island Point

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

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36096

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 25000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Esther Golar

Account : 18789

Mailing Address: P.O. Box 1214

City: Chicago State: IL Zip Code: 60690

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 14 / 2014

Transaction ID : SASL2.36038

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Fred Crespo

Account : 18789

Mailing Address: P.O. Box 95628

City: Hoffman Estates State: IL Zip Code: 60169

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 17 / 2014

Transaction ID : SASL2.36058

Amount of Each Receipt this Period: 7000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Gregory Harris

Account : 18789

Mailing Address: 5359 N. Magnolia

City: Chicago State: IL Zip Code: 60640

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 17 / 2014

Transaction ID : SASL2.36061

Amount of Each Receipt this Period: 8000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Jesse White

Account : 18789

Mailing Address: 134 N. LaSalle Suite 60602

City: Chicago State: IL Zip Code: 60602

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 16 / 2014

Transaction ID : SASL2.36052

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 26000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Lisa Madigan

Account : 18789

Mailing Address: 500 N. Dearborn, Suite 510

City: Chicago | State: IL | Zip Code: 60654

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 27 / 2014

Transaction ID : SASL2.35931

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Marcus C. Evans

Account : 18789

Mailing Address: 8539 S. Cottage Grove Avenue

City: Chicago | State: IL | Zip Code: 60619

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36088

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Maria A. Berrios

Account : 18789

Mailing Address: 33 N. LaSalle

City: Chicago | State: IL | Zip Code: 60602

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36078

Amount of Each Receipt this Period: 3000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Maria Spyropoulos

Account : 18789

Mailing Address: 180 N. LaSalle

City: Chicago | State: IL | Zip Code: 60601

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 14 / 2014

Transaction ID : SASL2.35889

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 19000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Citizens for Susan Garrett

Account : 18789

Mailing Address: 1181 Melody Road

City: Lake Forest | State: IL | Zip Code: 60045

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 21 / 2014

Transaction ID : SASL2.35911

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Civiltech Engineering, Inc.

Account : 18789

Mailing Address: 450 E. Devon Avenue

City: Itasca | State: IL | Zip Code: 60143

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 14 / 2014

Transaction ID : SASL2.35866

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Comcast Financial Agency Corporation

Account : 18789

Mailing Address: 1701 JFK Boulevard

City: Philadelphia | State: PA | Zip Code: 19103

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36080

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Committee for Frank J. Mautino

Account : 18789

Mailing Address: P.O. Box 36

City: Spring Valley | State: IL | Zip Code: 61362

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36094

Amount of Each Receipt this Period: 3000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 19000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Committee to Elect Robert J. Lovero
**Account :** 18789
Mailing Address 6536 W. Cermak
City: Berwyn State: IL Zip Code: 60402
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36131**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Committee to Re-elect Chuck Jefferson
**Account :** 18789
Mailing Address 1731 Montague Street
City: Rockford State: IL Zip Code: 61102
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 01 / 21 / 2014
**Transaction ID : SASL2.35811**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Commonwealth Edison
Account : 18789
Mailing Address 100 Constellation Way
City: Baltimore State: MD Zip Code: 21202
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 09 / 2014
**Transaction ID : SASL2.36002**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Community Banc PAc
Account : 18789
Mailing Address 901 Community Drive
City: Springfield State: IL Zip Code: 62703
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
**Transaction ID : SASL2.35960**
Amount of Each Receipt this Period: 2500.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 14500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Construction & General Laborers Dist. Council PAEL
**Account :** 18789
Mailing Address 999 McClintock Drive
City: Burr Ridge State: IL Zip Code: 60527
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 17 / 2014
**Transaction ID : SASL2.36057**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Cook County College Teachers Union - COPE
**Account :** 18789
Mailing Address 208 West Kinzie
City: Chicago State: IL Zip Code: 60610
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
**Transaction ID : SASL2.35962**
Amount of Each Receipt this Period: 3000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Cooney & Conway
Account : 18789
Mailing Address 120 N. LaSalle Street
City: Chicago State: IL Zip Code: 60602
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 14 / 2014
**Transaction ID : SASL2.36035**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Credit Union Political Action Council
Account : 18789
Mailing Address 1807 Diehl Road
City: Naperville State: IL Zip Code: 60566
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 02 / 28 / 2014
**Transaction ID : SASL2.35820**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 28000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Credit Union Political Action Council

Account : 18789

Mailing Address: 1807 Diehl Road

City: Naperville State: IL Zip Code: 60566

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 21 / 2014

Transaction ID : SASL2.35906

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Crowe Horwarth, LLP

Account : 18789

Mailing Address: 320 East Jefferson Boulevard

City: South Bend State: IL Zip Code: 46624

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 14 / 2014

Transaction ID : SASL2.35870

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Cullen, Inc.

Account : 18789

Mailing Address: 409 Jackson Parkway

City: Springfield State: IL Zip Code: 62704

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 05 / 12 / 2014

Transaction ID : SASL2.35839

Amount of Each Receipt this Period: 3000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Currie for State Representative

Account : 18789

Mailing Address: P.O. Box 377649

City: Chicago State: IL Zip Code: 60637

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36084

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 19000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: DENT IL PAC

Account : 18789

Mailing Address: 1010 South Second Street

City: Springfield | State: IL | Zip Code: 62705

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 21 / 2014

Transaction ID : SASL2.35907

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Development Specialists, Inc.

Account : 18789

Mailing Address: 70 West Madison

City: Chicago | State: IL | Zip Code: 60602

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 20 / 2014

Transaction ID : SASL2.36124

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Dykema Gossett

Account : 18789

Mailing Address: 400 Renaissasnce Center

City: Detroit | State: MI | Zip Code: 48243

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 14 / 2014

Transaction ID : SASL2.35872

Amount of Each Receipt this Period: 3000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Dynegy Administrative Services

Account : 18789

Mailing Address: 601 Travis, Suite 1400

City: Houston | State: TX | Zip Code: 77002

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 01 / 20 / 2014

Transaction ID : SASL2.35807

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 23000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Federation of Independent Illinois Colleges & Univ.
**Account :** 18789
Mailing Address 1123 South 2nd Street
City: Springfield State: IL Zip Code: 62704
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 29 / 2014
**Transaction ID : SASL2.35934**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Fletcher, O'Brien, Kasper & Nottage, PC
**Account :** 18789
Mailing Address 222 North LaSalle
City: Chicago State: IL Zip Code: 60601
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 13 / 2014
**Transaction ID : SASL2.36014**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Freeborn & Peters
Account : 18789
Mailing Address 311 S. Wacker Drive
City: Chicago State: IL Zip Code: 60606
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
**Transaction ID : SASL2.35874**
Amount of Each Receipt this Period: 2500.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Freedman Anselmo Lindberg, LLC
Account : 18789
Mailing Address 1807 W. Diehl Road
City: Naperville State: IL Zip Code: 60566
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36126**
Amount of Each Receipt this Period: 2000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 10500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friedman Properties, Ltd.

Account : 18789

Mailing Address: 350 N. Clark

City: Chicago | State: IL | Zip Code: 60654

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 21 / 2014

Transaction ID : SASL2.35909

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends for Monique Davis

Account : 18789

Mailing Address: P.O. Box 43637

City: Chicago | State: IL | Zip Code: 60643

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 20 / 2014

Transaction ID : SASL2.36122

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends for Verschoore

Account : 18789

Mailing Address: 4600 46th

City: Rock Island | State: IL | Zip Code: 61201

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36105

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Ann M. Williams

Account : 18789

Mailing Address: 4064 N. Lincoln Avenue

City: Chicago | State: IL | Zip Code: 60618

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36109

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 22000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Emily Klunk-McAsey

Account : 18789

Mailing Address: 920 S. State Street

City: Lockport | State: IL | Zip Code: 60441

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 17 / 2014

Transaction ID : SASL2.36065

Amount of Each Receipt this Period: 6000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Frank Zuccarelli

Account : 18789

Mailing Address: P.O. Box 115

City: South Holland | State: IL | Zip Code: 60473

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 02 / 06 / 2014

Transaction ID : SASL2.35815

Amount of Each Receipt this Period: 8900.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Frank Zuccarelli

Account : 18789

Mailing Address: P.O. Box 115

City: South Holland | State: IL | Zip Code: 60473

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 02 / 06 / 2014

Transaction ID : SASL2.35816

Amount of Each Receipt this Period: -400.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Frerichs

Account : 18789

Mailing Address: 45 E. University

City: Champaign | State: IL | Zip Code: 61820

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 18 / 2014

Transaction ID : SASL2.35891

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 24500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Jaime Andrade, Jr.

Account : 18789

Mailing Address: 3655 N. Kedzie Avenue

City: Chicago | State: IL | Zip Code: 60618

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36076

Amount of Each Receipt this Period: 2500.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Jehan Gordon

Account : 18789

Mailing Address: P.O. Box 6591

City: Peoria | State: IL | Zip Code: 61601

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36089

Amount of Each Receipt this Period: 7000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Jerry Costello

Account : 18789

Mailing Address: P.O. Box 186

City: Smithton | State: IL | Zip Code: 62285

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36082

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of John D'Amico

Account : 18789

Mailing Address: 4406 W. Lawrence

City: Chicago | State: IL | Zip Code: 60630

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 14 / 2014

Transaction ID : SASL2.36036

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 29500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Luis Arroyo

Account : 18789

Mailing Address: P.O. Box 47354

City: Chicago State: IL Zip Code: 60647

Name of Employer or Principal Place of Business

Occupation

Date of Receipt: 09 / 17 / 2014

Transaction ID : SASL2.36053

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Mary E. Flowers

Account : 18789

Mailing Address: 7712 S. Paulina

City: Chicago State: IL Zip Code: 60620

Name of Employer or Principal Place of Business

Occupation

Date of Receipt: 09 / 17 / 2014

Transaction ID : SASL2.36060

Amount of Each Receipt this Period: 3000.00

Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Robert 'Bob' Rita

Account : 18789

Mailing Address: 2030 High Street

City: Blue Island State: IL Zip Code: 60406

Name of Employer or Principal Place of Business

Occupation

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36098

Amount of Each Receipt this Period: 6000.00

Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Robert Martwick

Account : 18789

Mailing Address: P.O. Box 64298

City: Chicago State: IL Zip Code: 60664

Name of Employer or Principal Place of Business

Occupation

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36092

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 29000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends of Tabares

Account : 18789

Mailing Address: 7027 W. Archer Avenue

City: Chicago | State: IL | Zip Code: 60638

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36101

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Friends to Elect Kathleen Willis

Account : 18789

Mailing Address: 611 Holly Court

City: Addison | State: IL | Zip Code: 60101

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36111

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Globetrotters Engineering Corporation

Account : 18789

Mailing Address: 300 South Wacker Drive

City: Chicago | State: IL | Zip Code: 60606

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 21 / 2014

Transaction ID : SASL2.35913

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Good Government Council

Account : 18789

Mailing Address: 241 North Fifth Street

City: Springfield | State: IL | Zip Code: 62701

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 29 / 2014

Transaction ID : SASL2.35936

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 16000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Gori, Julian & Associates

Account : 18789

Mailing Address: 156 N. Main Street

City: Edwardsville | State: IL | Zip Code: 62025

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 14 / 2014

Transaction ID : SASL2.36040

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Health Care Service Corporation Employees PAC

Account : 18789

Mailing Address: 300 East Randolph

City: Chicago | State: IL | Zip Code: 60601

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 07 / 07 / 2014

Transaction ID : SASL2.35851

Amount of Each Receipt this Period: 5300.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Heat & Frost Local 17 PAC

Account : 18789

Mailing Address: 18520 Spring Creek Drive

City: Tinley Park | State: IL | Zip Code: 60477

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 06 / 2014

Transaction ID : SASL2.35964

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Houlihan Campaign Fund

Account : 18789

Mailing Address: 2409 Country Club Drive

City: Springfield | State: IL | Zip Code: 62704

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 16 / 2014

Transaction ID : SASL2.36048

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 30300.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Howard Kenner Government Consulting
Account : 18789
Mailing Address 727 East 60th Street
City: Chicago State: IL Zip Code: 60637
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 29 / 2014
Transaction ID : SASL2.35938
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Hurley McKenna & Mertz, PC
Account : 18789
Mailing Address 33 N. Dearborn St. Ste 1430
City: Chicago State: IL Zip Code: 60602
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 19 / 2014
Transaction ID : SASL2.36091
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
IBEW LOCAL 364
Account : 18789
Mailing Address 6820 Mill Road
City: Rockford State: IL Zip Code: 61108
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
Transaction ID : SASL2.35875
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
IBEW Local 701 PAC
Account : 18789
Mailing Address 28600 Bella Vista Parkway
City: Warrenville State: IL Zip Code: 60555
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
Transaction ID : SASL2.35965
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 17000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
IBEW PAC VOLUNTARY FUND
Account : 18789
Mailing Address 900 Seventh Street N.W.
City: Washington State: DC Zip Code: 20001
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09/20/2014
Transaction ID : SASL2.36128
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
ICAP-PAC
Account : 18789
Mailing Address 303 East Wacker Drive
City: Chicago State: IL Zip Code: 60601
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08/29/2014
Transaction ID : SASL2.35940
Amount of Each Receipt this Period: 6500.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois American Water Company PAC
Account : 18789
Mailing Address 100 N. Water Works Drive
City: Belleville State: IL Zip Code: 62223
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08/21/2014
Transaction ID : SASL2.35915
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Association of Fire Protection Districts Legislative PAC
Account : 18789
Mailing Address 10 S. Addison Road
City: Addison State: IL Zip Code: 60101
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08/21/2014
Transaction ID : SASL2.35917
Amount of Each Receipt this Period: 1500.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 19000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois CPA's for Political Action
**Account :** 18789
Mailing Address 550 West Jackson
City: Chicago State: IL Zip Code: 60661
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 02/18/2014
**Transaction ID : SASL2.35817**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois CPA's for Political Action
**Account :** 18789
Mailing Address 550 West Jackson
City: Chicago State: IL Zip Code: 60661
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 06/18/2014
**Transaction ID : SASL2.35850**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Dermatology PAC
Account : 18789
Mailing Address 10 W. Phillip Road
City: Vernon Hills State: IL Zip Code: 60061
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09/13/2014
**Transaction ID : SASL2.36016**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Harness Horsemen PAC
Account : 18789
Mailing Address 15 Spinning Wheel Road
City: Hinsdale State: IL Zip Code: 60521
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09/06/2014
**Transaction ID : SASL2.35967**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 16000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Hospital Association PAC
**Account :** 18789
Mailing Address 700 South Second Street
City: Springfield State: IL Zip Code: 62704
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 21 / 2014
**Transaction ID : SASL2.35919**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Insurance Political Committee
**Account :** 18789
Mailing Address 217 East Monroe Street
City: Springfield State: IL Zip Code: 62701
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 29 / 2014
**Transaction ID : SASL2.35942**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Medical Eye PAC
Account : 18789
Mailing Address 10 West Philip Road
City: Vernon Hills State: IL Zip Code: 60061
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
**Transaction ID : SASL2.35969**
Amount of Each Receipt this Period: 2500.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Optometric Association PAC
Account : 18789
Mailing Address 304 W. Washington Street
City: Springfield State: IL Zip Code: 62701
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
**Transaction ID : SASL2.35876**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 18500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Pipe Trades PAC
Account : 18789
Mailing Address 534 S. 2nd Street
City: Springfield State: IL Zip Code: 62704
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09/09/2014
Transaction ID : SASL2.36004
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Restaurateurs PAC
Account : 18789
Mailing Address 33 W. Monroe Street
City: Chicago State: IL Zip Code: 60603
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 01/21/2014
Transaction ID : SASL2.35809
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Society for Advanced Practice Nursing PAC
Account : 18789
Mailing Address P.O. Box 636
City: Manteno State: IL Zip Code: 60950
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09/06/2014
Transaction ID : SASL2.35971
Amount of Each Receipt this Period: 2500.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Trial Lawyers Association PAC
Account : 18789
Mailing Address 401 West Edwards Street
City: Springfield State: IL Zip Code: 62704
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09/09/2014
Transaction ID : SASL2.36006
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 27500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Illinois Veterinary Medical PAC
**Account :** 18789
Mailing Address 2722 North Vermilion
City: Danville State: IL Zip Code: 61832
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
**Transaction ID : SASL2.35973**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
INA PAC
**Account :** 18789
Mailing Address 107 West Cook Street
City: Springfield State: IL Zip Code: 62704
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 29 / 2014
**Transaction ID : SASL2.35944**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Ironworkers Local 1 PAL Fund
Account : 18789
Mailing Address 7720 Industrial Drive
City: Forest Park State: IL Zip Code: 60130
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36129**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Ironworkers Local 63 IPAL Fund
Account : 18789
Mailing Address 2525 West Lexington
City: Broadview State: IL Zip Code: 60153
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
**Transaction ID : SASL2.35877**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 4000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
John C. Corrigan & Associates, LLC
**Account :** 18789
Mailing Address 20 South Clark
City: Chicago State: IL Zip Code: 60603
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
**Transaction ID : SASL2.35868**
Amount of Each Receipt this Period: 1500.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
JP Morgan Chase & Company PAC
**Account :** 18789
Mailing Address 10 S. Dearborn
City: Chicago State: IL Zip Code: 60603
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 07 / 07 / 2014
**Transaction ID : SASL2.35853**
Amount of Each Receipt this Period: 2500.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Keefe & Keefe PC
Account : 18789
Mailing Address 6 Executive Woods Court
City: Belleville State: IL Zip Code: 62226
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 14 / 2014
**Transaction ID : SASL2.36042**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Knight Partners, LLC
Account : 18789
Mailing Address 221 North LaSalle
City: Chicago State: IL Zip Code: 60601
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 16 / 2014
**Transaction ID : SASL2.36050**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 24000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Kubasiak Fylstra Thorpe & Rutunno PC
**Account :** 18789
Mailing Address 20 South Clark Street
City: Chicago State: IL Zip Code: 60603
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
**Transaction ID : SASL2.35975**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Laborers Local 2
**Account :** 18789
Mailing Address 8842 W. Ogden Avenue
City: Brookfield State: IL Zip Code: 60513
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
**Transaction ID : SASL2.35977**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Law Offices of Terrence Kennedy
Account : 18789
Mailing Address 180 N. LaSalle Street
City: Chicago State: IL Zip Code: 60601
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 21 / 2014
**Transaction ID : SASL2.35922**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
M. Werner Consulting
Account : 18789
Mailing Address 282 S. Cass Street
City: Virginia State: IL Zip Code: 62691
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 21 / 2014
**Transaction ID : SASL2.35925**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 12000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Markoff Law, LLC

Account : 18789

Mailing Address: 29 N. Wacker Drive

City: Chicago | State: IL | Zip Code: 60606

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 20 / 2014

Transaction ID : SASL2.36133

Amount of Each Receipt this Period: 2000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Meyers & Flowers

Account : 18789

Mailing Address: 3 N. 2nd Street

City: St. Charles | State: IL | Zip Code: 60174

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 17 / 2014

Transaction ID : SASL2.36067

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Mid American Energy

Account : 18789

Mailing Address: P.O. Box 3006

City: Sioux City | State: IA | Zip Code: 51102

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 29 / 2014

Transaction ID : SASL2.35946

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Middle Class American PAC

Account : 18789

Mailing Address: P.O. Box 521

City: Western Springs | State: IL | Zip Code: 60558

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 03 / 20 / 2014

Transaction ID : SASL2.35830

Amount of Each Receipt this Period: 2500.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 19500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Monsanto Company

Account : 18789

Mailing Address: 800 North Lindbergh

City: St. Louis | State: MO | Zip Code: 63167

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 07 / 16 / 2014

Transaction ID : SASL2.35855

Amount of Each Receipt this Period: 1500.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Monsanto Company

Account : 18789

Mailing Address: 800 North Lindbergh

City: St. Louis | State: MO | Zip Code: 63167

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 06 / 2014

Transaction ID : SASL2.35979

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: MRH Solutions, LLC

Account : 18789

Mailing Address: 2420 S. Glenwood Avenue

City: Springfield | State: IL | Zip Code: 62704

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 06 / 2014

Transaction ID : SASL2.36147

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Newsweb Corporation

Account : 18789

Mailing Address: 1645 W. Fullerton

City: Chicago | State: IL | Zip Code: 60614

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 05 / 21 / 2014

Transaction ID : SASL2.35848

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 13500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Nolan, Thomas M. & Associates
**Account :** 18789
Mailing Address 1135 Ashland Avenue
City: River Forest State: IL Zip Code: 60305
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 13 / 2014
**Transaction ID : SASL2.36018**
Amount of Each Receipt this Period: 1500.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Oasis Legal Finance Company, LLC
**Account :** 18789
Mailing Address 40 N. Skokie Boulevard
City: Northbrook State: IL Zip Code: 60062
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36135**
Amount of Each Receipt this Period: 1500.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Operating Engineers Local 399 Political Education Fund
Account : 18789
Mailing Address 2260 South Grtove Street
City: Chicago State: IL Zip Code: 60616
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36137**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Painters District Council 14
Account : 18789
Mailing Address 1456 W. Adams
City: Chicago State: IL Zip Code: 60607
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36139**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 23000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Parsons Brinckerhoff, Inc.

Account : 18789

Mailing Address: One Penn Plaza

City: New York | State: NY | Zip Code: 10119

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 06 / 2014

Transaction ID : SASL2.35980

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Peck Bloom, LLC

Account : 18789

Mailing Address: 105 West Adams Street

City: Chicago | State: IL | Zip Code: 60603

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 29 / 2014

Transaction ID : SASL2.35948

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Peoples Gas

Account : 18789

Mailing Address: 200 E. Randolph

City: Chicago | State: IL | Zip Code: 60601

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 06 / 2014

Transaction ID : SASL2.35984

Amount of Each Receipt this Period: 2000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Phillips Law Office

Account : 18789

Mailing Address: 161 N. Clark Street

City: Chicago | State: IL | Zip Code: 60601

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 17 / 2014

Transaction ID : SASL2.36070

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 18000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Plumbers & Pipefitters Local 99 PAC Fund
**Account :** 18789
Mailing Address 406 South Eldorado Road
City: Bloomington State: IL Zip Code: 61704
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
**Transaction ID : SASL2.35986**
Amount of Each Receipt this Period: 2000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Plumbers & Pipefitters Local 99 PAC Fund
**Account :** 18789
Mailing Address 406 South Eldorado Road
City: Bloomington State: IL Zip Code: 61704
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
**Transaction ID : SASL2.35988**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Plumbers & Pipefitters Local 99 PAC Fund
Account : 18789
Mailing Address 406 South Eldorado Road
City: Bloomington State: IL Zip Code: 61704
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 06 / 2014
**Transaction ID : SASL2.35989**
Amount of Each Receipt this Period: -2000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Power Rogers & Smith, P.C.
Account : 18789
Mailing Address 70 W. Madison St., Ste 5500
City: Chicago State: IL Zip Code: 60601
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 14 / 2014
**Transaction ID : SASL2.36044**
Amount of Each Receipt this Period: 10000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 11000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Primera Engineers, Ltd.

Account : 18789

Mailing Address: 100 South Wacker Drive

City: Chicago | State: IL | Zip Code: 60606

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 13 / 2014

Transaction ID : SASL2.36023

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Professional Independent Insurance Agents PAC

Account : 18789

Mailing Address: 4360 Wabash Avenue

City: Springfield | State: IL | Zip Code: 62707

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 06 / 2014

Transaction ID : SASL2.35990

Amount of Each Receipt this Period: 2000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Pullano Richard L. Law Offices

Account : 18789

Mailing Address: 100 W. Monroe

City: Chicago | State: IL | Zip Code: 60603

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 17 / 2014

Transaction ID : SASL2.36071

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Real Estate Analysis Corporation

Account : 18789

Mailing Address: 205 North Michigan Avenue

City: Chicago | State: IL | Zip Code: 60601

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 21 / 2014

Transaction ID : SASL2.35927

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 9000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Rekooh Management, LLC
**Account :** 18789
Mailing Address 1201 S. Prairie Avenue
City: Chicago State: IL Zip Code: 60605
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
**Transaction ID : SASL2.35879**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Resurgence Financial LLC
**Account :** 18789
Mailing Address 1161 Lake Cook Road
City: Deerfield State: IL Zip Code: 60015
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36140**
Amount of Each Receipt this Period: 2000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Rosenfeld Zweig & Donenberg, Ltd.
Account : 18789
Mailing Address 95 Revere Drive
City: Hillside State: IL Zip Code: 60162
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
**Transaction ID : SASL2.35881**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Sandner Group Insurance Program Managers
Account : 18789
Mailing Address 155 N. Wacker Drive
City: Chicago State: IL Zip Code: 60606
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36142**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 5000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
Sheet Metal Workers Assn. Local 73 PAC
**Account :** 18789
Mailing Address 4550 Roosevelt Road
City: Hillside State: IL Zip Code: 60162
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
**Transaction ID : SASL2.35883**
Amount of Each Receipt this Period: 2000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
Sheet Metal Workers Union Local 265 PAC Fund
**Account :** 18789
Mailing Address 205 Alexandra Way
City: Carol Stream State: IL Zip Code: 60188
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
**Transaction ID : SASL2.35885**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Special Account
Account : 18789
Mailing Address 1609 East 53rd Street
City: Chicago State: IL Zip Code: 60615
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 08 / 14 / 2014
**Transaction ID : SASL2.35887**
Amount of Each Receipt this Period: 3500.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Stand for Children Illinois PAC
Account : 18789
Mailing Address 850 W. Jackson Boulevard # 330
City: Chicago State: IL Zip Code: 60607
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 02 / 06 / 2014
**Transaction ID : SASL2.35813**
Amount of Each Receipt this Period: 8900.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 15400.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Stephens PAC NFP

Account : 18789

Mailing Address: P.O. Box 533

City: Rosemont | State: IL | Zip Code: 60018

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 04 / 16 / 2014

Transaction ID : SASL2.35837

Amount of Each Receipt this Period: 2500.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Steven K. Jambois Law, PC

Account : 18789

Mailing Address: 60 West Randolph Street

City: Chicago | State: IL | Zip Code: 60601

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36099

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Taft, Stettinius & Hollister

Account : 18789

Mailing Address: 111 East Wacker

City: Chicago | State: IL | Zip Code: 60601

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 13 / 2014

Transaction ID : SASL2.36021

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Taxpayers for Quinn

Account : 18789

Mailing Address: 676 N. LaSalle

City: Chicago | State: IL | Zip Code: 60610

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 26 / 2014

Transaction ID : SASL2.35930

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 27500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Teamsters Local 627

Account : 18789

Mailing Address: 7101 N. Allen Road

City: Peoria | State: IL | Zip Code: 61614

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 06 / 2014

Transaction ID : SASL2.35992

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: TENET Healthcare Corporation

Account : 18789

Mailing Address: P.O. Box 130300

City: Dallas | State: TX | Zip Code: 75313

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 03 / 26 / 2014

Transaction ID : SASL2.35834

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: TENET Healthcare Corporation PAC

Account : 18789

Mailing Address: 3820 State Street

City: Santa Barbara | State: CA | Zip Code: 93105

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 03 / 20 / 2014

Transaction ID : SASL2.35832

Amount of Each Receipt this Period: 2500.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: TENET Healthcare Corporation PAC

Account : 18789

Mailing Address: 3820 State Street

City: Santa Barbara | State: CA | Zip Code: 93105

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 03 / 20 / 2014

Transaction ID : SASL2.35833

Amount of Each Receipt this Period: -2500.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 11000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: The Auto Club Group

Account : 18789

Mailing Address: 1 Auto Club Drive

City: Dearborn | State: MI | Zip Code: 48126

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 14 / 2014

Transaction ID : SASL2.35862

Amount of Each Receipt this Period: 1500.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: The Healy Law Firm

Account : 18789

Mailing Address: 111 West Washington

City: Chicago | State: IL | Zip Code: 60602

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 17 / 2014

Transaction ID : SASL2.36063

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: The Illinois Risk Management Services

Account : 18789

Mailing Address: 1151 East Warrenville Road

City: Naperville | State: IL | Zip Code: 60563

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 05 / 14 / 2014

Transaction ID : SASL2.35843

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: The Lombard Company

Account : 18789

Mailing Address: 4245 W. 123rd Street

City: Alsip | State: IL | Zip Code: 60603

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08 / 21 / 2014

Transaction ID : SASL2.35924

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 22500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
The People for Emanuel 'Chris' Welch
**Account :** 18789
Mailing Address 233 Oak Ridge Avenue
City: Hillside State: IL Zip Code: 60162
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 14 / 2014
**Transaction ID : SASL2.36045**
Amount of Each Receipt this Period: 2000.00
Aggregate Year-to-Date

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
The Roosevelt Group
**Account :** 18789
Mailing Address 600 W. Van Buren Street
City: Chicago State: IL Zip Code: 60607
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 05 / 12 / 2014
**Transaction ID : SASL2.35841**
Amount of Each Receipt this Period: 2500.00
Aggregate Year-to-Date

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
Thomson Weir LLC
Account : 18789
Mailing Address 420 W. Capitol Avenue
City: Springfield State: IL Zip Code: 62704
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 09 / 13 / 2014
**Transaction ID : SASL2.36025**
Amount of Each Receipt this Period: 7500.00
Aggregate Year-to-Date

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
Thornton Heights Terrace, Ltd.
Account : 18789
Mailing Address 160 West Tenth Street
City: Chicago Heights State: IL Zip Code: 60411
Name of Employer or Principal Place of Business
Occupation
Date of Receipt: 03 / 06 / 2014
**Transaction ID : SASL2.35828**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date

**SUBTOTAL** of Receipts This Page (optional) ▶ 13000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Tomasik Kotin & Kasserman

Account : 18789

Mailing Address: 10 S. LaSalle

City: Chicago | State: IL | Zip Code: 60603

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36103

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: Tooling & Manufacturing Association PC

Account : 18789

Mailing Address: 1177 South Dee Road

City: Park Ridge | State: IL | Zip Code: 60068

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 13 / 2014

Transaction ID : SASL2.36027

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: TRK PAC

Account : 18789

Mailing Address: 2727 N. Dirksen

City: Springfield | State: IL | Zip Code: 62702

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 06 / 2014

Transaction ID : SASL2.35994

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Trucking Industry PAC

Account : 18789

Mailing Address: 7000 S. Adams Street

City: Willowbrook | State: IL | Zip Code: 60527

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 06 / 2014

Transaction ID : SASL2.35996

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 17000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: UA Political Education Committee

Account : 18789

Mailing Address: 3 Park Place

City: Annapolis | State: MD | Zip Code: 21401

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09/09/2014

Transaction ID : SASL2.36008

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: UAW Illinois PAC

Account : 18789

Mailing Address: 680 Barclay

City: Lincolnshire | State: IL | Zip Code: 60069

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08/29/2014

Transaction ID : SASL2.35950

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: UFCW Local 881

Account : 18789

Mailing Address: 10400 W. Higgins Road

City: Rosemont | State: IL | Zip Code: 60018

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 08/21/2014

Transaction ID : SASL2.35929

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: United Steel Workers PAC

Account : 18789

Mailing Address: Five Gateway Center

City: Pittsburg | State: IL | Zip Code: 15222

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09/02/2014

Transaction ID : SASL2.35954

Amount of Each Receipt this Period: 5000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 35000.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name
United Transportation Union PAC
**Account :** 18789
Mailing Address 24950 Country Club Boulevard
City: North Olmsted State: OH Zip Code: 44070
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 09 / 02 / 2014
**Transaction ID : SASL2.35956**
Amount of Each Receipt this Period: 5000.00
Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name
United Transportation Union PAC
**Account :** 18789
Mailing Address 24950 Country Club Boulevard
City: North Olmsted State: OH Zip Code: 44070
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 09 / 13 / 2014
**Transaction ID : SASL2.36029**
Amount of Each Receipt this Period: 2500.00
Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name
United Union of Roofers Local 11 Pol. Fund
Account : 18789
Mailing Address 9838 West Roosevelt
City: Westchester State: IL Zip Code: 60154
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 09 / 06 / 2014
**Transaction ID : SASL2.35998**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name
UPS PAC
Account : 18789
Mailing Address 55 Glenview Parkway NE
City: Atlanta State: GA Zip Code: 30328
Name of Employer or Principal Place of Business
Occupation

Date of Receipt: 07 / 16 / 2014
**Transaction ID : SASL2.35857**
Amount of Each Receipt this Period: 6000.00
Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 14500.00

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

# SCHEDULE L–A (FEC Form 3X)
## ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: Weilmuenster Law Group PC

Account : 18789

Mailing Address: 3201 W. Main Street

City: Belleville | State: IL | Zip Code: 62226

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36107

Amount of Each Receipt this Period: 2500.00

Aggregate Year-to-Date:

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name: William Davis for State Representative

Account : 18789

Mailing Address: P.O. Box 704

City: Homewood | State: IL | Zip Code: 60430

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 19 / 2014

Transaction ID : SASL2.36086

Amount of Each Receipt this Period: 3000.00

Aggregate Year-to-Date:

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name: Winning Systems, Inc.

Account : 18789

Mailing Address: 105 South York Road

City: Elmhurst | State: IL | Zip Code: 60126

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 13 / 2014

Transaction ID : SASL2.36030

Amount of Each Receipt this Period: 1000.00

Aggregate Year-to-Date:

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name: Zalewski for State Representative

Account : 18789

Mailing Address: 7676 W. 63rd Street

City: Summit | State: IL | Zip Code: 60501

Name of Employer or Principal Place of Business:

Occupation:

Date of Receipt: 09 / 20 / 2014

Transaction ID : SASL2.36144

Amount of Each Receipt this Period: 10000.00

Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 16500.00

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

# SCHEDULE L–A (FEC Form 3X)
# ITEMIZED RECEIPTS OF LEVIN FUNDS

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



FOR LINE NUMBER: (check only one) ☐ 1a ☒ 2

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.**
Full Name (Last, First, Middle Initial) / Full Organization Name: Zeman Homes & Neighborhoods
**Account :** 18789
Mailing Address: 6547 N. Avondale
City: Chicago State: IL Zip Code: 60631
Name of Employer or Principal Place of Business:
Occupation:
Date of Receipt: 09 / 20 / 2014
**Transaction ID : SASL2.36145**
Amount of Each Receipt this Period: 1000.00
Aggregate Year-to-Date:

**B.**
Full Name (Last, First, Middle Initial) / Full Organization Name:
**Account :**
Mailing Address:
City: State: Zip Code:
Name of Employer or Principal Place of Business:
Occupation:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
Aggregate Year-to-Date:

**C.**
Full Name (Last, First, Middle Initial) / Full Organization Name:
Account :
Mailing Address:
City: State: Zip Code:
Name of Employer or Principal Place of Business:
Occupation:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
Aggregate Year-to-Date:

**D.**
Full Name (Last, First, Middle Initial) / Full Organization Name:
Account :
Mailing Address:
City: State: Zip Code:
Name of Employer or Principal Place of Business:
Occupation:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
Aggregate Year-to-Date:

**SUBTOTAL** of Receipts This Page (optional) ▶ 1000.00

**TOTAL** This Period (last page this line number only) ▶ 907400.00

Image# 14952544618

# SCHEDULE L–B (FEC Form 3X)
## ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: (check only one) ☐ 4a ☐ 4b ☐ 4c ☒ 4d ☐ 5



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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A.** Full Name (Last, First, Middle Initial) / Full Organization Name: DEMOCRATIC PARTY OF ILLINOIS

Mailing Address: P.O. BOX 518

City: SPRINGFIELD State: IL Zip Code: 62705

Purpose of Disbursement: Levin transfer to Federal account

Date of Disbursement: 10 / 01 / 2014

**Transaction ID : SBSL4D.35804**

Amount of Each Disbursement this Period: 782902.46

**Account :** 18789

**B.** Full Name (Last, First, Middle Initial) / Full Organization Name:

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

**Account :**

**C.** Full Name (Last, First, Middle Initial) / Full Organization Name:

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

Account :

**D.** Full Name (Last, First, Middle Initial) / Full Organization Name:

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

Account :

**E.** Full Name (Last, First, Middle Initial) / Full Organization Name:

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

**Account :**

**SUBTOTAL** of Disbursements This Page (optional) ▶ 782902.46

**TOTAL** This Period (last page this line number only) ▶ 782902.46