

# 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

To Protect Our Heritage PAC

ADDRESS (number and street) 3939 Greenwood St.

Check if different than previously reported. (ACC) Skokie IL 60076

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00135541

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

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

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 01 / 01 / 2021 through M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2021

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

Molotsky, Alan, E., ,

Type or Print Name of Treasurer

Signature of Treasurer Molotsky, Alan, E., , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 07 / 04 / 2021

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**To Protect Our Heritage PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		147785.70
(b) Cash on Hand at Beginning of Reporting Period.....	147785.70	
(c) Total Receipts (from Line 19) .....	19214.25	19214.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	166999.95	166999.95
7. Total Disbursements (from Line 31).....	19953.28	19953.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	147046.67	147046.67
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

Write or Type Committee Name

**To Protect Our Heritage PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	16381.25	16381.25
(ii) Unitemized .....	2833.00	2833.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	19214.25	19214.25
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	19214.25	19214.25
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	19214.25	19214.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	19214.25	19214.25

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6853.28	6853.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6853.28	6853.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13100.00	13100.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19953.28	19953.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19953.28	19953.28

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	19214.25	19214.25
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19214.25	19214.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6853.28	6853.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6853.28	6853.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Alter, Bradley, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 10 / 2021
Mailing Address 8825 Springfield		<b>Transaction ID : SA11AI.9033</b>
City Skokie	State IL	Zip Code 60076
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Certified Health Management	Occupation (for Individual) Executive	<input type="checkbox"/> Memo Item Contribution to our PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Becker, Richard, , ,</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2021
Mailing Address 190 Vine		<b>Transaction ID : SA11AI.8978</b>
City Highland Park	State IL	Zip Code 60035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer (for Individual) Becker Architects	Occupation (for Individual) Architect	<input type="checkbox"/> Memo Item Contribution to our PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Berkowitz, Roberta, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 22 / 2021
Mailing Address 3917 Lee Street		<b>Transaction ID : SA11AI.8983</b>
City Skokie	State IL	Zip Code 60076
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item Contribution to our PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Feiger, Kathy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5900 N. Ocean Drive 2S  
 City Hollywood State LA Zip Code 33019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Recruiter Occupation (for Individual) Crawford Supply  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1918.00

Date of Receipt **03 / 10 / 2021**  
**Transaction ID : SA11AI.8979**  
 Amount of Each Receipt this Period 1800.00  
 Memo Item  
 Contribution to our PAC

**B. Forman, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9241 N. Drake  
 City Evanston State IL Zip Code 60203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Linda Forman CPA, PC Occupation (for Individual) CPA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 17 / 2021**  
**Transaction ID : SA11AI.9035**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Contribution to our PAC

**C. Friedman, Lawrence, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9010 Karlov Ave.  
 City Skokie State IL Zip Code 60076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Locke Lord Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **01 / 25 / 2021**  
**Transaction ID : SA11AI.8960**  
 Amount of Each Receipt this Period 600.00  
 Memo Item  
 Contribution to our PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

**A. Gerstein, Shayle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9655 Woods Dr.  
 City Skokie State IL Zip Code 60077  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 19 / 2021  
**Transaction ID : SA11AI.9039**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Contribution to our PAC

**B. Gold, Michael, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1524 W. Voltz Rd  
 City Northbrook State IL Zip Code 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Arangold Corp Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 19 / 2021  
**Transaction ID : SA11AI.8952**  
 Amount of Each Receipt this Period 600.00  
 Memo Item  
 Contribution to our PAC

**C. Greenland, Philip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9449 Avers Ave  
 City Evanston State IL Zip Code 60203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Northwestern University Occupation (for Individual) Professor/Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 29 / 2021  
**Transaction ID : SA11AI.8959**  
 Amount of Each Receipt this Period 600.00  
 Memo Item  
 Contribution to our PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A. Henry, Amyra, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2847 Idlewood Lane  
 City Highland Park State IL Zip Code 60035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Licensed Social Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 22 / 2021**  
**Transaction ID : SA11AI.8989**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Contribution to our PAC

**B. Hoberman, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4201 Davis Street  
 City Skokie State IL Zip Code 60076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Northwest Suburban Podiatry Occupation (for Individual) Podiatrist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 906.25

Date of Receipt **02 / 28 / 2021**  
**Transaction ID : SA11AI.8981**  
 Amount of Each Receipt this Period 906.25  
 Memo Item  
 Contribution to our PAC

**C. Hochberg, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 E. Pearson St.  
 City Chicago State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2575.00

Date of Receipt **05 / 24 / 2021**  
**Transaction ID : SA11AI.9036**  
 Amount of Each Receipt this Period 2575.00  
 Memo Item  
 Contribution to our PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3731.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Lorig, Sondra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 718 Carlyle Ct.  
 City Northbrook State IL Zip Code 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 28 / 2021  
**Transaction ID : SA11AI.9034**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Contribution to our PAC

**B. Rothke, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7633 N. Arcadia  
 City Morton Grove State IL Zip Code 60053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NeuroBehavior & Rehab Network Occupation (for Individual) Neuropsychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 01 / 19 / 2021  
**Transaction ID : SA11AI.8951**  
 Amount of Each Receipt this Period 1200.00  
 Memo Item  
 Contribution to our PAC

**C. Shechtman, Allen, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1530 N. Dearborn #25N  
 City Chicago State IL Zip Code 60610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Legend Group, LLC Occupation (for Individual) Real Estate Management/Investing  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2021  
**Transaction ID : SA11AI.9038**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Contribution to our PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

**A. Wasserman, Michael, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8780 W. Golf Rd  
 City Niles State IL Zip Code 60714  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lake Cook Neurological Consult Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 13 / 2021**  
**Transaction ID : SA11AI.9040**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Contribution to our PAC

**B. Weinger, Bruce, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2550 Steven Lane  
 City Northbrook State IL Zip Code 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kovitz Investment Group Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **02 / 23 / 2021**  
**Transaction ID : SA11AI.8977**  
 Amount of Each Receipt this Period 600.00  
 Memo Item  
 Contribution to our PAC

**C. Weissberg, Victor, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4820 W. Sherwin  
 City Lincolnwood State IL Zip Code 60712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 25 / 2021**  
**Transaction ID : SA11AI.8972**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Contribution to our PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 12 OF 19  
(check only one)

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

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wengrow, Heschell, , ,

Mailing Address 7400 N. Francisco

City Chicago	State IL	Zip Code 60645
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Stay Care Management	Occupation (for Individual) Administration
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
01 / 25 / 2021

**Transaction ID : SA11AI.8963**

Amount of Each Receipt this Period  
600.00

Memo Item  
Contribution to our PAC

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16381.25

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Constant Contact .com**

Mailing Address 1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Membership management softward

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.9015**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mangurten, Rina, , ,**

Mailing Address 9345 Ozark Ave.

City Morton Grove State IL Zip Code 60053

Purpose of Disbursement  
Administrative Assistance

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.9010**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Marked Agency**

Mailing Address 10853 S. Vincennes Ave  
Unit B

City Chicago State IL Zip Code 60643

Purpose of Disbursement  
Marketing consulting

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.9019**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Merchant Services Credit Processing**

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement  
Credit card processing Fees

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
03 / 05 / 2021

FEC Identification Number  
  
**Transaction ID : SB21B.9014**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Merchant Services Credit Processing**

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement  
Credit card processing fees

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
04 / 05 / 2021

FEC Identification Number  
  
**Transaction ID : SB21B.9016**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Merchant Services Credit Processing**

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement  
10853 S. Vincennes Ave

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
05 / 05 / 2021

FEC Identification Number  
  
**Transaction ID : SB21B.9025**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Merchant Services Credit Processing**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement 10853 S. Vincennes Ave

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 04 / 2021

FEC Identification Number: C

Transaction ID : **SB21B.9024**

Amount of Each Disbursement this Period: 45.73

Memo Item

**B. Paypal**

Full Name (Last, First, Middle Initial)

Mailing Address 11128 John Galt Road

City Omaha State NE Zip Code 68137

Purpose of Disbursement 10853 S. Vincennes Ave

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 24 / 2021

FEC Identification Number: C

Transaction ID : **SB21B.9023**

Amount of Each Disbursement this Period: 74.98

Memo Item

**C. Rina, Mangurten, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 8345 Ozark Ave

City Morton Grove State IL Zip Code 60053

Purpose of Disbursement Administrative assistance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 07 / 2021

FEC Identification Number: C

Transaction ID : **SB21B.8948**

Amount of Each Disbursement this Period: 765.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 885.71

**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)

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

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

Full Name (Last, First, Middle Initial) <b>A. Rina, Mangurten, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2021	
Mailing Address 8345 Ozark Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.9027</b> Amount of Each Disbursement this Period [REDACTED] 301.50	
City Morton Grove	State IL	Zip Code 60053	Category/ Type 001
Purpose of Disbursement Administrative assistance		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Stat Graphics</b>		Date of Disbursement MM / DD / YYYY 01 / 12 / 2021	
Mailing Address 468 Diens Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8947</b> Amount of Each Disbursement this Period [REDACTED] 2831.03	
City Wheeling	State IL	Zip Code 60090	Category/ Type 003
Purpose of Disbursement Print and mail newsletter		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [REDACTED] Amount of Each Disbursement this Period [REDACTED]	
City	State	Zip Code	Category/ Type
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3132.53
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED] 6292.22



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. BOOZMAN FOR ARKANSAS</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2021
Mailing Address PO BOX 671		FEC Identification Number C00476317 <b>Transaction ID : SB23.9031</b>
City ROGERS	State AR	Zip Code 72757
Purpose of Disbursement Contribution to re-election campaign		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>BOOZMAN FOR ARKANSAS</b>		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AR	District: 00	

Full Name (Last, First, Middle Initial) <b>B. BOST, MICHAEL</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2021
Mailing Address 5 PORTER LANE		FEC Identification Number C00546499 <b>Transaction ID : SB23.9050</b>
City MURPHYSBORO	State IL	Zip Code 62966
Purpose of Disbursement Contribution to re-election campaign		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BOST, MICHAEL</b>		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 12	

Full Name (Last, First, Middle Initial) <b>C. DUCKWORTH, L TAMMY</b>		Date of Disbursement MM / DD / YYYY 06 / 21 / 2021
Mailing Address PO BOX 10793		FEC Identification Number C00574889 <b>Transaction ID : SB23.9052</b>
City CHICAGO	State IL	Zip Code 60610
Purpose of Disbursement Contribution to re-election campaign		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>DUCKWORTH, L TAMMY</b>		Category/Type 011
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 00	

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

11000.00

**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)

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

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

Full Name (Last, First, Middle Initial) <b>A. KINZINGER FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2021
Mailing Address PO Box 1050		FEC Identification Number C00458877 <b>Transaction ID : SB23.9030</b>
City Bourbonnais	State IL	Zip Code 60914
Purpose of Disbursement Contribution to re-election campaign		011 Category/ Type
Candidate Name <b>KINZINGER FOR CONGRESS</b>		Amount of Each Disbursement this Period 1800.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 11	

Full Name (Last, First, Middle Initial) <b>B. KRISHNAMOORTHY, S. RAJA</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2021
Mailing Address PO BOX 681202		FEC Identification Number C00575092 <b>Transaction ID : SB23.9051</b>
City SCHAUMBURG	State IL	Zip Code 60168
Purpose of Disbursement Contribution to re-election campaign		011 Category/ Type
Candidate Name <b>KRISHNAMOORTHY, S. RAJA</b>		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 08	

Full Name (Last, First, Middle Initial) <b>C. SASSE, BENJAMIN E</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address 105 EAST 6TH STREET		FEC Identification Number C00547976 <b>Transaction ID : SB23.9062</b>
City FREMONT	State NE	Zip Code 68025
Purpose of Disbursement Check not cashed; voided		011 Category/ Type
Candidate Name <b>SASSE, BENJAMIN E</b>		Amount of Each Disbursement this Period - 5000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NE	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	- 2200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. SASSE, BENJAMIN E**

Mailing Address 105 EAST 6TH STREET

City FREMONT State NE Zip Code 68025

Purpose of Disbursement  
Check not cashed; voided

011  
Category/  
Type

Candidate Name  
**SASSE, BENJAMIN E**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼  
State: NE District: 00

Date of Disbursement  
MM / DD / YYYY  
06 / 30 / 2021

FEC Identification Number  
C 000547976  
**Transaction ID : SB23.9063**  
Amount of Each Disbursement this Period  
- 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHNEIDER FOR CONGRESS**

Mailing Address PO BOX 1318

City DEERFIELD State IL Zip Code 60015

Purpose of Disbursement  
Contribution to re-election campaign

011  
Category/  
Type

Candidate Name  
**SCHNEIDER FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼  
State: IL District: 10

Date of Disbursement  
MM / DD / YYYY  
05 / 21 / 2021

FEC Identification Number  
C 000495952  
**Transaction ID : SB23.9032**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SHONTEL BROWN FOR CONGRESS**

Mailing Address PO Box 221232

City Beachwood State OH Zip Code 44122

Purpose of Disbursement  
Contribution to election campaign

011  
Category/  
Type

Candidate Name  
**BROWN, SHONTEL, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2021  
 Primary  General  
 Other (specify) ▼  
Special-Primary  
State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 21 / 2021

FEC Identification Number  
C c00764381  
**Transaction ID : SB23.9057**  
Amount of Each Disbursement this Period  
1800.00

Memo Item

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

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

4300.00  
13100.00