

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 661  
 Check if different than previously reported. (ACC) Collinsville IL 62234-0661

2. **FEC IDENTIFICATION NUMBER** C C00258855 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) IL 15

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)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on 03 / 18 / 2014 in the State of IL

(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on   /   /   in the State of  

5. Covering Period 01 / 01 / 2014 through 02 / 26 / 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 Mary Maxwell  
Signature of Treasurer Mary Maxwell *[Electronically Filed]* Date 03 / 06 / 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.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Volunteers for Shimkus**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	77295	1007481
(b) Total Contribution Refunds (from Line 20(d)) .....	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	77295	1007481
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	59824.53	728401.87
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	698.82
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	59824.53	727703.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1039537.71	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

**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 3 (Revised 12/2003)

Write or Type Committee Name

**Volunteers for Shimkus**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 02 / 26 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	14400	122755
(ii) Unitemized.....	275	33721
(iii) TOTAL of contributions from individuals ▶	14675	156476
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	62620	851005
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	77295	1007481
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	698.82
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	38.59	11141.86
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	77333.59	1019321.68

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	59824.53	728401.87
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS .....	7925	264360
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	67749.53	992761.87

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1029953.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	77333.59
25. SUBTOTAL (add Line 23 and Line 24).....	1107287.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	67749.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1039537.71

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N  
Transaction ID :

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**Hunton & Williams LLP**

Mailing Address 1900 K Street NW

City Washington State DC Zip Code 20006-1110

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 12 / 2014**

**Transaction ID : A-CF56670**

Amount of Each Receipt this Period  
 Contribution **1200**

**B.** Full Name (Last, First, Middle Initial)  
**Ronald Arbogast**

Mailing Address 12900 State Route 56 SE

City Mt Sterling State OH Zip Code 43143-9146

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

Name of Employer Occupation  
 OH Willow Wood Company Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF56715**

Amount of Each Receipt this Period  
 Contribution **1000**

**C.** Full Name (Last, First, Middle Initial)  
**Douglas Hartmann**

Mailing Address 110 Timberwood Lane

City Collinsville State IL Zip Code 62234-6862

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

Name of Employer Occupation  
 Self Real Estate Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 12 / 2014**

**Transaction ID : A-CF56680**

Amount of Each Receipt this Period  
 Contribution **500**

Earmarked through Votesane Pac. Conduit received 2/12/2014

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

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

**2700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**Votesane Pac**

Mailing Address **PO Box 2713**

City **Alexandria** State **VA** Zip Code **22301-0713**

FEC ID number of contributing federal political committee. **C C00484535**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

**Transaction ID : A-CF56680.e**

Amount of Each Receipt this Period  
 Contribution **500**

**[MEMO ITEM]**  
 Earmarked-Original Details. Total Earmarked via this conduit: \$500.00. PAC limit not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Robert Hobart**

Mailing Address **2133 Blair Boulevard**

City **Nashville** State **TN** Zip Code **37212-4901**

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

Name of Employer Occupation  
**McBee Strategic Consulting Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 02 / 2014**

**Transaction ID : A-CF56687**

Amount of Each Receipt this Period  
 Contribution **2500**

**C.** Full Name (Last, First, Middle Initial)  
**Perry Jaynes**

Mailing Address **213 Heritage Trace**

City **Danville** State **IL** Zip Code **61834-5925**

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

Name of Employer Occupation  
**Self Insurance and Financial Serv**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 12 / 2014**

**Transaction ID : A-CF56685**

Amount of Each Receipt this Period  
 Contribution **250**

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

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

**2750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**Craig MacDonald**

Mailing Address 318 Bill Lou Drive

City Collinsville State IL Zip Code 62234-5404

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

Name of Employer BiState Commission Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56722**

Amount of Each Receipt this Period  
 Contribution **250**

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Mattoon**

Mailing Address 6344 Cavalier Corridor

City Falls Church State VA Zip Code 22044-1203

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

Name of Employer Podesta/Mattoon Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56675**

Amount of Each Receipt this Period  
 Contribution **500**

**C.** Full Name (Last, First, Middle Initial)  
**Louis Mervis**

Mailing Address 200 N. Logan Ave

City Danville State IL Zip Code 61832

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

Name of Employer Mervis Industries Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56677**

Amount of Each Receipt this Period  
 Contribution **1000**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**John Morris**

Mailing Address **PO Box 734**

City **Robinson** State **IL** Zip Code **62454-0734**

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

Name of Employer **Self** Occupation **Businessman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF56704**

Amount of Each Receipt this Period  
**2600**  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Elise Pickering**

Mailing Address **3721 Taft Avenue**

City **Alexandria** State **VA** Zip Code **22304-2617**

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

Name of Employer **Mehlman Vogel Castagnetti** Occupation **Lobbyist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 12 / 2014**

**Transaction ID : A-CF56679**

Amount of Each Receipt this Period  
**500**  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Eric Schmidt**

Mailing Address **PO Box 335**

City **Saint Jacob** State **IL** Zip Code **62281-0335**

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

Name of Employer **Progressive Voice & Data, Inc.** Occupation **Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 02 / 2014**

**Transaction ID : A-CF56686**

Amount of Each Receipt this Period  
**2600**  
 Contribution

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

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

**5700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>Vance Schuemann</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 505 Cathedral Drive		<b>Transaction ID : A-CF56674</b>
City Alexandria	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 500
Name of Employer Appian Consulting	Occupation Consultant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Jack Sharkey</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address PO Box 3156		<b>Transaction ID : A-CF56678</b>
City Quincy	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 250
Name of Employer Sharkey Transportation	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>Donald Tracy</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 205 S 5th Street Suite 700		<b>Transaction ID : A-CF56714</b>
City Springfield	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Contribution 250
Name of Employer Brown Hay Law Firm	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**Darren Willcox**

Mailing Address 9696 Mill Ridge Lane

City State Zip Code  
Great Falls VA 22066-2300

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

Name of Employer Occupation  
W Strategies Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF56731**

Amount of Each Receipt this Period  
 Contribution **500**

**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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y 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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**500.00**

**14400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**ABATE of Illinois FedPAC**

Mailing Address 311 E Main Street  
Suite 418

City Galesburg State IL Zip Code 61401-4867

FEC ID number of contributing federal political committee. **C** C00308460

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
120

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56683**

Amount of Each Receipt this Period  
 Contribution 120

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

Mailing Address 1 N Waukegan Road

City North Chicago State IL Zip Code 60064-1802

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56713**

Amount of Each Receipt this Period  
 Contribution 1000

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

Mailing Address 1 N Waukegan Road

City North Chicago State IL Zip Code 60064-1802

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56727**

Amount of Each Receipt this Period  
 Contribution 1000

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

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

2120.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

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

Mailing Address 1 N Waukegan Road

City North Chicago State IL Zip Code 60064-1802

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5500

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56730**

Amount of Each Receipt this Period  
 Contribution 500

**B.** Full Name (Last, First, Middle Initial)  
**Akerman LLP PAC**

Mailing Address 495 N Keller Road  
Suite 300

City Maitland State FL Zip Code 32751-8656

FEC ID number of contributing federal political committee. **C** C00280008

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56666**

Amount of Each Receipt this Period  
 Contribution 2500

**C.** Full Name (Last, First, Middle Initial)  
**American Hospital Association PAC**

Mailing Address 325 7th Street NW

City Washington State DC Zip Code 20004-2818

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4500

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56665**

Amount of Each Receipt this Period  
 Contribution 2000

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 59
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**American Maritime Officers Vol. Pol. Fun**

Mailing Address **PO Box 66**

City **Dania Beach** State **FL** Zip Code **33004-0066**

FEC ID number of contributing federal political committee. **C C00027532**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
M M / D D / Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF56725**

Amount of Each Receipt this Period  
**2500**  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
**American Podiatric Medical Assn. Inc. Podiatry Political Action Committee**

Mailing Address **9312 Old Georgetown Road**

City **Bethesda** State **MD** Zip Code **20814-1621**

FEC ID number of contributing federal political committee. **C C00008839**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
M M / D D / Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF56707**

Amount of Each Receipt this Period  
**2500**  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
**American Water Works Co. PAC**

Mailing Address **1025 Laurel Oak Road**

City **Voorhees** State **NJ** Zip Code **08043-3506**

FEC ID number of contributing federal political committee. **C C00354548**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M / D D / Y Y Y Y  
**02 / 12 / 2014**

**Transaction ID : A-CF56676**

Amount of Each Receipt this Period  
**500**  
Contribution

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

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

**5500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**Bayer Corporation Political Action Committee**

Mailing Address 100 Bayer Road

City Pittsburgh State PA Zip Code 15205-9707

FEC ID number of contributing federal political committee. **C** C00281162

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56663**

Amount of Each Receipt this Period  
 Contribution 2500

**B.** Full Name (Last, First, Middle Initial)  
**Bayer Corporation Political Action Committee**

Mailing Address 100 Bayer Road

City Pittsburgh State PA Zip Code 15205-9707

FEC ID number of contributing federal political committee. **C** C00281162

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56673**

Amount of Each Receipt this Period  
 Contribution 1000

**C.** Full Name (Last, First, Middle Initial)  
**Bechtel Group, Inc. Political Action Committee (bechtel Political Action Committee)**

Mailing Address 50 Beale Street

City San Francisco State CA Zip Code 94105-1813

FEC ID number of contributing federal political committee. **C** C00103697

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56672**

Amount of Each Receipt this Period  
 Contribution 1000

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 16 OF 59  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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)  
**Volunteers for Shimkus**

A. Full Name (Last, First, Middle Initial)  
**Biogen Idec Political Action Committee**  
 Mailing Address 14 Cambridge Center  
 City State Zip Code  
 Cambridge MA 02142-1453  
 FEC ID number of contributing federal political committee. **C C00390351**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 4500

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014  
**Transaction ID : A-CF56667**  
 Amount of Each Receipt this Period  
 2500  
 Contribution

B. Full Name (Last, First, Middle Initial)  
**Chesapeake Energy Corporation Fed-Pac**  
 Mailing Address PO Box 18496  
 City State Zip Code  
 Oklahoma City OK 73154-0496  
 FEC ID number of contributing federal political committee. **C C00389288**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2500

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014  
**Transaction ID : A-CF56664**  
 Amount of Each Receipt this Period  
 2500  
 Contribution

C. Full Name (Last, First, Middle Initial)  
**Deloitte & Touche PAC**  
 Mailing Address PO Box 365  
 City State Zip Code  
 Washington DC 20044-0365  
 FEC ID number of contributing federal political committee. **C C00211318**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : A-CF56708**  
 Amount of Each Receipt this Period  
 1000  
 Contribution

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A. Full Name (Last, First, Middle Initial)**  
**Foley & Lardner Political Fund**

Mailing Address 3000 K Street NW  
Suite 500

City Washington State DC Zip Code 20007-5111

FEC ID number of contributing federal political committee. **C C00105338**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56671**

Amount of Each Receipt this Period  
 Contribution 1000

**B. Full Name (Last, First, Middle Initial)**  
**John Deere PAC**

Mailing Address 1 John Deere Place

City Moline State IL Zip Code 61265-8010

FEC ID number of contributing federal political committee. **C C00204099**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56703**

Amount of Each Receipt this Period  
 Contribution 3500

**C. Full Name (Last, First, Middle Initial)**  
**K&L Gates LLP PAC**

Mailing Address 1601 K Street NW

City Washington State DC Zip Code 20006-1682

FEC ID number of contributing federal political committee. **C C00213173**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56709**

Amount of Each Receipt this Period  
 Contribution 1000

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A. Full Name (Last, First, Middle Initial)**  
**Lowes Companies, Inc. Political Action Committee**

Mailing Address 1000 Lowes Boulevard

City Mooresville State NC Zip Code 28117-8520

FEC ID number of contributing federal political committee. **C C00251751**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56668**

Amount of Each Receipt this Period  
 Contribution **1000**

**B. Full Name (Last, First, Middle Initial)**  
**Medtronic Medical Technology Fund**

Mailing Address 950 F Street NW Suite 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee. **C C00311878**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **6000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56705**

Amount of Each Receipt this Period  
 Contribution **1000**

**C. Full Name (Last, First, Middle Initial)**  
**Medtronic Medical Technology Fund**

Mailing Address 950 F Street NW Suite 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee. **C C00311878**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **6000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56706**

Amount of Each Receipt this Period  
 Contribution **1000**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A. Midwest Region Laborers Political League**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 117 S. 5th St. , Suite 720  
 City Springfield State IL Zip Code 62701  
 FEC ID number of contributing federal political committee. **C** C00342907  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : A-CF56701**  
 Amount of Each Receipt this Period  
 Contribution 5000

**B. Molina Healthcare, Inc. Pac**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 Oceangate Suite 100  
 City Long Beach State CA Zip Code 90802-4317  
 FEC ID number of contributing federal political committee. **C** C00430256  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : A-CF56710**  
 Amount of Each Receipt this Period  
 Contribution 1000

**C. National Assoc. of Insurance & Fin. Adv.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address NAIFAPAC 2901 Telestar Court  
 City Falls Church State VA Zip Code 22042  
 FEC ID number of contributing federal political committee. **C** C00005249  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : A-CF56723**  
 Amount of Each Receipt this Period  
 Contribution 5000

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**National Association Of Chemical Distributors Responsible Distribution Political Action Co**

Mailing Address 1555 Wilson Boulevard  
Suite 700

City Arlington State VA Zip Code 22209-2415

FEC ID number of contributing federal political committee. **C C00379180**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 12 / 2014**

**Transaction ID : A-CF56662**

Amount of Each Receipt this Period  
 Contribution **5000**

**B.** Full Name (Last, First, Middle Initial)  
**Navistar, Inc. Good Government Committee**

Mailing Address 4201 Winfield Road  
# 1488

City Warrenville State IL Zip Code 60555-4025

FEC ID number of contributing federal political committee. **C C00040840**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF56728**

Amount of Each Receipt this Period  
 Contribution **1000**

**C.** Full Name (Last, First, Middle Initial)  
**PPL People for Good Govt PAC**

Mailing Address 2 N 9th Street

City Allentown State PA Zip Code 18101-1139

FEC ID number of contributing federal political committee. **C C00228106**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 26 / 2014**

**Transaction ID : A-CF56726**

Amount of Each Receipt this Period  
 Contribution **2500**

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

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

**8500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

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

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3010

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56711**

Amount of Each Receipt this Period  
 Contribution 1000

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

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3010

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56712**

Amount of Each Receipt this Period  
 Contribution 1000

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

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3010

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56729**

Amount of Each Receipt this Period  
 Contribution 1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**The Blue Cross Blue Shield Assoc PAC**

Mailing Address 1310 G Street NW

City Washington State DC Zip Code 20005-3000

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56702**

Amount of Each Receipt this Period  
 Contribution 2500

**B.** Full Name (Last, First, Middle Initial)  
**The Doctor's Company Federal PAC**

Mailing Address 185 Greenwood Road

City Napa State CA Zip Code 94558-6270

FEC ID number of contributing federal political committee. **C** C00300376

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 12 / 2014

**Transaction ID : A-CF56669**

Amount of Each Receipt this Period  
 Contribution 1000

**C.** Full Name (Last, First, Middle Initial)  
**The Orthopaedic PAC**

Mailing Address 317 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56724**

Amount of Each Receipt this Period  
 Contribution 2500

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

**A.** Full Name (Last, First, Middle Initial)  
**Wine and Spirits Wholesalers of Amer PAC**

Mailing Address 805 15th Street NW  
Suite 430

City Washington State DC Zip Code 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2014

**Transaction ID : A-CF56734**

Amount of Each Receipt this Period  
 Contribution 2500

**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)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y 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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2500.00

62620.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Security National Bank of Witt</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 31 / 2014
Mailing Address 1 W Broadway		<b>Transaction ID : A-MF56861</b>
City Witt State IL Zip Code 62094	Amount of Each Receipt this Period _____ 38.55	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation	Interest on Account
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 578.99	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period _____
City State Zip Code	Name of Employer Occupation	
FEC ID number of contributing federal political committee. C	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period _____
City State Zip Code	Name of Employer Occupation	
FEC ID number of contributing federal political committee. C	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 38.55
<b>TOTAL</b> This Period (last page this line number only).....	_____ 38.55

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Ameren</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 06 / 2014</b>
Mailing Address <b>PO Box 66884</b>		Amount of Each Disbursement this Period <b>160.19</b>
City <b>Saint Louis</b> State <b>MO</b> Zip Code <b>63166-6884</b>	Purpose of Disbursement <b>Campaign Office Utilities</b>	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : B-E-56748</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ameren</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 03 / 2014</b>
Mailing Address <b>PO Box 66884</b>		Amount of Each Disbursement this Period <b>210.61</b>
City <b>Saint Louis</b> State <b>MO</b> Zip Code <b>63166-6884</b>	Purpose of Disbursement <b>Utilities on Campaign Office</b>	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : B-E-56821</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Benny's Prime Steakhouse</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 03 / 2014</b>
Mailing Address <b>444 N Wabash Avenue</b>		Amount of Each Disbursement this Period <b>472.22</b>
City <b>Chicago</b> State <b>IL</b> Zip Code <b>60611-5622</b>	Purpose of Disbursement <b>Food for Fundraising Event</b>	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : B-E-56820</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>843.02</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Capital Grille</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address 601 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 200.6 <b>Transaction ID : B-E-56832</b>
City Washington State DC Zip Code 20004-2601	Purpose of Disbursement Food and Drink Candidate Name Category/Type 001	
Office Sought: House Senate President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 921.77 <b>Transaction ID : B-E-56751</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Food and Drink Candidate Name Category/Type 001	
Office Sought: House Senate President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 01 / 14 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 441.03 <b>Transaction ID : B-E-56765</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Food and Drink Candidate Name Category/Type 001	
Office Sought: House Senate President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1563.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 670.82 <b>Transaction ID : B-E-56766</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Food and Drink Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 5972.48 <b>Transaction ID : B-E-56837</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Catering for Fundraising Events Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Casey's General Store</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 217 N Bluff Road		Amount of Each Disbursement this Period 28.42 <b>Transaction ID : B-E-56805</b>
City Collinsville State IL Zip Code 62234-2904	Purpose of Disbursement Travel: Gas Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6671.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Champaign Hotel and Conference Center</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 1900 S 1st Street		Amount of Each Disbursement this Period 358.18 <b>Transaction ID : B-E-56808</b>
City Champaign State IL Zip Code 61820-7450	Purpose of Disbursement Travel: Hotel Rooms Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Charter Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address PO Box 1688		Amount of Each Disbursement this Period 275.04 <b>Transaction ID : B-E-56788</b>
City Fond Du Lac State WI Zip Code 54936-1688	Purpose of Disbursement Internet, Phone, Cable for Campaign Office Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Charter Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address PO Box 1688		Amount of Each Disbursement this Period 275.02 <b>Transaction ID : B-E-56851</b>
City Fond Du Lac State WI Zip Code 54936-1688	Purpose of Disbursement Internet, Phone, TV for campaign office Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	908.24
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 1701 John F Kennedy Boulevard		Amount of Each Disbursement this Period 822.71 <b>Transaction ID : B-E-56758</b>
City Philadelphia State PA Zip Code 19103-2833	Purpose of Disbursement Internet Service 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 1701 John F Kennedy Boulevard		Amount of Each Disbursement this Period 138.5 <b>Transaction ID : B-E-56836</b>
City Philadelphia State PA Zip Code 19103-2833	Purpose of Disbursement Internet Service 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. CompleteCampaigns.Com</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 575 <b>Transaction ID : B-E-56756</b>
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement FEC Reporting Software 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	822.71
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. CompleteCampaigns.Com</b>		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 575 <b>Transaction ID : B-E-56823</b>
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement FEC Reporting Software 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CompleteCampaigns.Com</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 255 <b>Transaction ID : B-E-56688</b>
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Processing Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. CompleteCampaigns.Com</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 5 <b>Transaction ID : B-E-56717</b>
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Processing Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	835.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. CompleteCampaigns.Com</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period ..... 25
City San Diego State CA Zip Code 92123-1880	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	001 Category/Type	Transaction ID : B-E-56732
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Effingham Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 903 N Keller Drive		Amount of Each Disbursement this Period ..... 130
City Effingham State IL Zip Code 62401-1742	Purpose of Disbursement Membership Dues	
Candidate Name	001 Category/Type	Transaction ID : B-E-56769
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period ..... 184.91
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Delivery Charges	
Candidate Name	001 Category/Type	Transaction ID : B-E-56735
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 339.91
<b>TOTAL</b> This Period (last page this line number only).....	.....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. Federal Express</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		22		2014
M M	/	D D	/	Y Y Y Y								
01		22		2014								
Mailing Address PO Box 1140		Amount of Each Disbursement this Period										
City Memphis State TN Zip Code 38101-1140		<table border="1"> <tr> <td>581.21</td> </tr> </table>	581.21									
581.21												
Purpose of Disbursement Delivery Charges		Transaction ID : B-E-56789										
Candidate Name		Category/Type										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. Federal Express</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		19		2014
M M	/	D D	/	Y Y Y Y								
02		19		2014								
Mailing Address PO Box 1140		Amount of Each Disbursement this Period										
City Memphis State TN Zip Code 38101-1140		<table border="1"> <tr> <td>51.88</td> </tr> </table>	51.88									
51.88												
Purpose of Disbursement Delivery Charges		Transaction ID : B-E-56850										
Candidate Name		Category/Type										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. Fifth Street Flower Shop</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		10		2014
M M	/	D D	/	Y Y Y Y								
01		10		2014								
Mailing Address 739 S 5th Street		Amount of Each Disbursement this Period										
City Springfield State IL Zip Code 62703-2345		<table border="1"> <tr> <td>86</td> </tr> </table>	86									
86												
Purpose of Disbursement Floral Delivery		Transaction ID : B-E-56755										
Candidate Name		Category/Type										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>719.09</td> </tr> </table>	719.09
719.09		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. GoGo Inflight</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 1250 N Arl Heights Road Suite 500		Amount of Each Disbursement this Period 49.95 <b>Transaction ID : B-E-56772</b>
City Itasca State IL Zip Code 60143-1216	Purpose of Disbursement In Flight Internet 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GoGo Inflight</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 1250 N Arl Heights Road Suite 500		Amount of Each Disbursement this Period 49.95 <b>Transaction ID : B-E-56843</b>
City Itasca State IL Zip Code 60143-1216	Purpose of Disbursement In Flight Internet 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Gula Graham Group</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 700 12th Street NW Suite 700		Amount of Each Disbursement this Period 11915.52 <b>Transaction ID : B-E-56757</b>
City Washington State DC Zip Code 20005-4052	Purpose of Disbursement Fundraising Expenses and Retainer 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12015.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 11.49
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Fundraising Meeting Expenses 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-3611  [MEMO ITEM] Subitemization of Gula Graham Group(01/10/14)
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address PO Box 1140		Amount of Each Disbursement this Period 77.03
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Delivery Charges 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-3609  [MEMO ITEM] Subitemization of Gula Graham Group(01/10/14)
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Menus Catering</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 655 Taylor Street NE		Amount of Each Disbursement this Period 225.27
City Washington State DC Zip Code 20017-2063	Purpose of Disbursement Catering for Fundraiser 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-3612  [MEMO ITEM] Subitemization of Gula Graham Group(01/10/14)
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. CompleteCampaigns.Com</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 3635 Ruffin Road Floor 3		Amount of Each Disbursement this Period 115
City San Diego	State CA	
Zip Code 92123-1880		[MEMO ITEM] Subitemization of Gula Graham Group(01/10/14)
Purpose of Disbursement Blast Email and Fax Serv.	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capital Grille</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 601 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 9446.83
City Washington	State DC	
Zip Code 20004-2601		[MEMO ITEM] Subitemization of Gula Graham Group(01/10/14)
Purpose of Disbursement Catering for Fundraisers	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Uber Technologies</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 11.44
City San Francisco	State CA	
Zip Code 94105-1611		[MEMO ITEM] Subitemization of Gula Graham Group(01/10/14)
Purpose of Disbursement Cab Fare	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 15 / 2014</b>
Mailing Address 101 W Jefferson Street		Amount of Each Disbursement this Period <b>166.67</b> Transaction ID : B-E-56774
City Springfield State IL Zip Code 62702-5145	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. L and M Promotions</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 18 / 2014</b>
Mailing Address 1300 I Street NW Suite 400 W		Amount of Each Disbursement this Period <b>5000</b> Transaction ID : B-E-56846
City Washington State DC Zip Code 20005-3314	Purpose of Disbursement Concert tickets for Fundraising Event Candidate Name Category/Type <b>003</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Law Offices of John Fogarty</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 14 / 2014</b>
Mailing Address 4043 N Ravenswood Avenue		Amount of Each Disbursement this Period <b>1275</b> Transaction ID : B-E-56770
City Chicago State IL Zip Code 60613-1155	Purpose of Disbursement Legal Services for Petition Review Candidate Name Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6441.67</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Lowell's Service Station</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 2000 Vandalia Street		Amount of Each Disbursement this Period 40.16 <b>Transaction ID : B-E-56794</b>
City Collinsville	State IL	
Zip Code 62234-4800	Purpose of Disbursement Travel: Gas	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Lowell's Service Station</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 2000 Vandalia Street		Amount of Each Disbursement this Period 20.23 <b>Transaction ID : B-E-56803</b>
City Collinsville	State IL	
Zip Code 62234-4800	Purpose of Disbursement Travel: Gas	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. MB Maxwell Consulting Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 5 Stonehill Court		Amount of Each Disbursement this Period 4333.33 <b>Transaction ID : B-E-56740</b>
City Edwardsville	State IL	
Zip Code 62025-6764	Purpose of Disbursement Retainer for Campaign Finances and Reporting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4393.72
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. MB Maxwell Consulting Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2014
Mailing Address 5 Stonehill Court		Amount of Each Disbursement this Period 4333.33 <b>Transaction ID : B-E-56741</b>
City Edwardsville State IL Zip Code 62025-6764	Purpose of Disbursement Retainer for Campaign Finances and Reporting Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. MB Maxwell Consulting Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2014
Mailing Address 5 Stonehill Court		Amount of Each Disbursement this Period 4333.34 <b>Transaction ID : B-E-56742</b>
City Edwardsville State IL Zip Code 62025-6764	Purpose of Disbursement Retainer for Campaign Finances and Reporting Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Modern Mailing</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address PO Box 19246		Amount of Each Disbursement this Period 2409.02 <b>Transaction ID : B-E-56738</b>
City Springfield State IL Zip Code 62794-9246	Purpose of Disbursement Printing and Postage for Campaign Christmas Card Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11075.69
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 59		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Motomart</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 733 N Bluff Road		Amount of Each Disbursement this Period 30.83 <b>Transaction ID : B-E-56841</b>
City Collinsville	State IL	
Purpose of Disbursement Travel: Gas		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Motomart</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 733 N Bluff Road		Amount of Each Disbursement this Period 56.75 <b>Transaction ID : B-E-56855</b>
City Collinsville	State IL	
Purpose of Disbursement Travel: Gas		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Motomart</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 733 N Bluff Road		Amount of Each Disbursement this Period 26.89 <b>Transaction ID : B-E-56860</b>
City Collinsville	State IL	
Purpose of Disbursement Travel: Gas		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	114.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Oceanaire</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 18 / 2014</b>
Mailing Address <b>1201 F Street NW</b>		Amount of Each Disbursement this Period <b>1391.6</b> <b>Transaction ID : B-E-56845</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20004-1217</b>	Purpose of Disbursement <b>Fundraising: Catering for Fundraiser</b> Category/Type <b>003</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 15 / 2014</b>
Mailing Address <b>6647 Edwardsville Crossing Drive</b>		Amount of Each Disbursement this Period <b>97.05</b> <b>Transaction ID : B-E-56773</b>
City <b>Edwardsville</b> State <b>IL</b> Zip Code <b>62025-2704</b>	Purpose of Disbursement <b>Mailing Labels</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 21 / 2014</b>
Mailing Address <b>6647 Edwardsville Crossing Drive</b>		Amount of Each Disbursement this Period <b>99.72</b> <b>Transaction ID : B-E-56784</b>
City <b>Edwardsville</b> State <b>IL</b> Zip Code <b>62025-2704</b>	Purpose of Disbursement <b>Printing Supplies</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1588.37</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 6647 Edwardsville Crossing Drive		Amount of Each Disbursement this Period 87.33 <b>Transaction ID : B-E-56796</b>
City Edwardsville	State IL	
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 220 Junction Drive		Amount of Each Disbursement this Period 91.11 <b>Transaction ID : B-E-56783</b>
City Glen Carbon	State IL	
Purpose of Disbursement Toner Ink Cartridges	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 220 Junction Drive		Amount of Each Disbursement this Period 298.2 <b>Transaction ID : B-E-56785</b>
City Glen Carbon	State IL	
Purpose of Disbursement Printer for Campaign Office	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	476.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 59		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 220 Junction Drive		Amount of Each Disbursement this Period 25 <b>Transaction ID : B-E-56804</b>
City Glen Carbon	State IL	
Zip Code 62034-4320	Purpose of Disbursement Copy Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 220 Junction Drive		Amount of Each Disbursement this Period 28.84 <b>Transaction ID : B-E-56806</b>
City Glen Carbon	State IL	
Zip Code 62034-4320	Purpose of Disbursement Administrative/Salary/Overhead: Paper	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 220 Junction Drive		Amount of Each Disbursement this Period 245.73 <b>Transaction ID : B-E-56828</b>
City Glen Carbon	State IL	
Zip Code 62034-4320	Purpose of Disbursement Labels and Toner	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	299.57
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Office Max</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 220 Junction Drive		Amount of Each Disbursement this Period 245 <b>Transaction ID : B-E-56844</b>
City Glen Carbon	State IL	
Zip Code 62034-4320	Purpose of Disbursement Copy Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Quick Trip</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 2490 Troy Road		Amount of Each Disbursement this Period 47.9 <b>Transaction ID : B-E-56754</b>
City Edwardsville	State IL	
Zip Code 62025-2585	Purpose of Disbursement Travel: Gas	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Quick Trip</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2014
Mailing Address 2490 Troy Road		Amount of Each Disbursement this Period 43.11 <b>Transaction ID : B-E-56763</b>
City Edwardsville	State IL	
Zip Code 62025-2585	Purpose of Disbursement Travel: Gas	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	336.01
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Ruth's Chris Steakhouse</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 724 9th Street NW			Amount of Each Disbursement this Period 351.45 <b>Transaction ID : B-E-56819</b>
City Washington	State DC	Zip Code 20001-4505	
Purpose of Disbursement Food and Drink		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 232 N Kingshighway Boulevard			Amount of Each Disbursement this Period 152 <b>Transaction ID : B-E-56778</b>
City Saint Louis	State MO	Zip Code 63108-1206	
Purpose of Disbursement Travel: Airfare		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 232 N Kingshighway Boulevard			Amount of Each Disbursement this Period 12.5 <b>Transaction ID : B-E-56780</b>
City Saint Louis	State MO	Zip Code 63108-1206	
Purpose of Disbursement Travel: Bag Fee		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	515.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 232 N Kingshighway Boulevard		Amount of Each Disbursement this Period 324 <b>Transaction ID : B-E-56833</b>
City Saint Louis	State MO	
Zip Code 63108-1206	Purpose of Disbursement Travel: Airfare	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 232 N Kingshighway Boulevard		Amount of Each Disbursement this Period 426 <b>Transaction ID : B-E-56852</b>
City Saint Louis	State MO	
Zip Code 63108-1206	Purpose of Disbursement Travel: Airfare	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Staples Credit Plan</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 2490 Wabash Avenue		Amount of Each Disbursement this Period 282.59 <b>Transaction ID : B-E-56736</b>
City Springfield	State IL	
Zip Code 62704-4201	Purpose of Disbursement Office Supplies/File Cabinet	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1032.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 59		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Staples Credit Plan</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address 2490 Wabash Avenue		Amount of Each Disbursement this Period 13.38 <b>Transaction ID : B-E-56856</b>
City Springfield State IL Zip Code 62704-4201	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Terry Farmer Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 2711 W Washington Street		Amount of Each Disbursement this Period 2275 <b>Transaction ID : B-E-56737</b>
City Springfield State IL Zip Code 62702-3466	Purpose of Disbursement Campaign Christmas Cards Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Flower Basket</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 317 W Main Street		Amount of Each Disbursement this Period 54.05 <b>Transaction ID : B-E-56764</b>
City Collinsville State IL Zip Code 62234-3003	Purpose of Disbursement Floral Delivery Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2342.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. The Flower Basket</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2014
Mailing Address 317 W Main Street		Amount of Each Disbursement this Period 108.1 <b>Transaction ID : B-E-56835</b>
City Collinsville	State IL	
Zip Code 62234-3003	Purpose of Disbursement Floral Delivery	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Uber Technologies</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 5 <b>Transaction ID : B-E-56739</b>
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Uber Technologies</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 40 <b>Transaction ID : B-E-56745</b>
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	153.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period ..... 20
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	
Candidate Name	002 Category/ Type	<b>Transaction ID : B-E-56749</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period ..... 88
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	
Candidate Name	002 Category/ Type	<b>Transaction ID : B-E-56753</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period ..... 4.7
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	
Candidate Name	002 Category/ Type	<b>Transaction ID : B-E-56759</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 112.70
<b>TOTAL</b> This Period (last page this line number only).....	.....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 28.42
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	<b>Transaction ID : B-E-56761</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 18.55
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	<b>Transaction ID : B-E-56775</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 24.21
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	<b>Transaction ID : B-E-56779</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	71.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 13.19 <b>Transaction ID : B-E-56790</b>
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 10.49 <b>Transaction ID : B-E-56792</b>
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 8.37 <b>Transaction ID : B-E-56800</b>
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	32.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 10.25 <b>Transaction ID : B-E-56802</b>
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 6.39 <b>Transaction ID : B-E-56813</b>
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 14.54 <b>Transaction ID : B-E-56815</b>
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	31.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 47.46
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	<b>Transaction ID : B-E-56817</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 9.87
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	<b>Transaction ID : B-E-56822</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 61.4
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare	<b>Transaction ID : B-E-56825</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	118.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 12 <b>Transaction ID : B-E-56831</b>
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 43.85 <b>Transaction ID : B-E-56840</b>
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Uber Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 182 Howard Street Suite 8		Amount of Each Disbursement this Period 10.9 <b>Transaction ID : B-E-56847</b>
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel: Cab Fare Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	66.75
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. United States Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 130 S Center Street		Amount of Each Disbursement this Period 197.2 <b>Transaction ID : B-E-56798</b>
City Collinsville	State IL	
Zip Code 62234-0005	Purpose of Disbursement Administrative/Salary/Overhead: Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. United States Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 1500 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 1176.69 <b>Transaction ID : B-E-56767</b>
City Washington	State DC	
Zip Code 20220-0001	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. United States Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 1500 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 42 <b>Transaction ID : B-E-56812</b>
City Washington	State DC	
Zip Code 20220-0001	Purpose of Disbursement 2013 FUTA Tax	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1415.89
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 55 Glenlake Parkway NE		Amount of Each Disbursement this Period 13.18 <b>Transaction ID : B-E-56848</b>
City Atlanta State GA Zip Code 30328-3474	Purpose of Disbursement Delivery Charge 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. V and F Services</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 304 W Main Street		Amount of Each Disbursement this Period 600 <b>Transaction ID : B-E-56824</b>
City Collinsville State IL Zip Code 62234-3017	Purpose of Disbursement Campaign Office Rent 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address PO Box 6170		Amount of Each Disbursement this Period 583.43 <b>Transaction ID : B-E-56744</b>
City Carol Stream State IL Zip Code 60197-6170	Purpose of Disbursement Telephone and Data Service 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1196.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Weber Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 1100 Manor Drive		Amount of Each Disbursement this Period ..... 19
City Chalfont	State PA	
Zip Code 18914-2252	Purpose of Disbursement Website Hosting Fee	001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sarah Ails</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 1349 27th Street		Amount of Each Disbursement this Period ..... 500
City Highland	State IL	
Zip Code 62249-2768	Purpose of Disbursement Data Entry Services	001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period .....
City	State	
Zip Code	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 519.00
<b>TOTAL</b> This Period (last page this line number only).....	..... 58442.75

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 59	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Ford County Republican Central Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 14 / 2014</b>
Mailing Address <b>PO Box 218</b>		Amount of Each Disbursement this Period <b>250</b> <b>Transaction ID : B-E-56768</b>
City <b>Paxton</b> State <b>IL</b> Zip Code <b>60957-0218</b>	Purpose of Disbursement Political Contribution: Contribution <b>011</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Brad Maxwell</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 21 / 2014</b>
Mailing Address <b>PO Box 223</b>		Amount of Each Disbursement this Period <b>2500</b> <b>Transaction ID : B-E-56787</b>
City <b>Troy</b> State <b>IL</b> Zip Code <b>62294-0223</b>	Purpose of Disbursement Political Contribution: Contribution <b>011</b> Category/Type	
Candidate Name <b>Brad Maxwell</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	(For State/Local Candidate Support)
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Friends of Brad Maxwell</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 06 / 2014</b>
Mailing Address <b>PO Box 223</b>		Amount of Each Disbursement this Period <b>5000</b> <b>Transaction ID : B-E-56829</b>
City <b>Troy</b> State <b>IL</b> Zip Code <b>62294-0223</b>	Purpose of Disbursement Political Contribution: Contribution <b>011</b> Category/Type	
Candidate Name <b>Brad Maxwell</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	(For State/Local Candidate Support)
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>7750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 59	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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)  
**Volunteers for Shimkus**

Full Name (Last, First, Middle Initial) <b>A. Illinois Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 01 / 2014</b>
Mailing Address PO Box 78		Amount of Each Disbursement this Period \$ <b>600</b>
City Springfield	State IL	
Zip Code 62705-0078		<b>Transaction ID : B-I-56863</b>
Purpose of Disbursement I/K of Rent for Office Space	Category/ Type <b>001</b>	
Candidate Name		<b>[MEMO ITEM]</b> Inkind Donation Made
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period \$
City	State	
Zip Code		<b>Category/ Type</b>
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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period \$
City	State	
Zip Code		<b>Category/ Type</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	\$ <b>7750.00</b>