

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

To Protect Our Heritage PAC

ADDRESS (number and street) 2421 W. Pratt

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

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

C00135541

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

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

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2010 through 09 30 2010

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

Type or Print Name of Treasurer Alan E. Molotsky

Signature of Treasurer Electronically Filed by Alan E. Molotsky Date 10 03 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
To Protect Our Heritage PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		212302.73
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	213807.25									
(c) Total Receipts (from Line 19) .....	3806.81	22212.99								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	217614.06	234515.72								
7. Total Disbursements (from Line 31) .....	24191.24	41092.90								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	193422.82	193422.82								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
To Protect Our Heritage PAC

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	500.00	12750.00
(ii) Unitemized .....	1243.00	7220.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1743.00	19970.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	1743.00	19970.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2063.81	2242.99
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	3806.81	22212.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3806.81	22212.99

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1691.24	12492.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1691.24	12492.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22000.00	28100.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	500.00	500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	24191.24	41092.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24191.24	41092.90

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	1743.00	19970.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1743.00	19970.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1691.24	12492.90
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1691.24	12492.90

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 20	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

A.

Full Name (Last, First, Middle Initial) Wendy Wagner		Date of Receipt
Mailing Address 125 Camden Court		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
City	State	Zip Code
Lincolnshire	IL	60069
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.6068
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer CVS Caremark	Occupation Medical Editor	Contribution to the PAC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		<input type="text" value="650.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="500.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 20

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)

1st Equity Bank Northwest

Mailing Address 1330 Dundee

City State Zip Code  
Buffalo Grove IL 60089

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1992.80

Date of Receipt

M M / D D / Y Y Y Y  
09 / 08 / 2010

Transaction ID: SA17.6063

Amount of Each Receipt this Period

1992.80

Interest on savings account

**B.**

Full Name (Last, First, Middle Initial)

First Suburban Bank

Mailing Address 150 S. Fifth Avenue

City State Zip Code  
Maywood IL 60153

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
203.38

Date of Receipt

M M / D D / Y Y Y Y  
07 / 31 / 2010

Transaction ID: SA17.6057

Amount of Each Receipt this Period

24.20

Interest on account

**C.**

Full Name (Last, First, Middle Initial)

First Suburban Bank

Mailing Address 150 S. Fifth Avenue

City State Zip Code  
Maywood IL 60153

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.55

Date of Receipt

M M / D D / Y Y Y Y  
08 / 31 / 2010

Transaction ID: SA17.6058

Amount of Each Receipt this Period

24.17

Interest on account

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

2041.17

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 20	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) First Suburban Bank		Date of Receipt
Mailing Address 150 S. Fifth Avenue		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
City	State	Zip Code
Maywood	IL	60153
FEC ID number of contributing federal political committee.		Transaction ID: SA17.6059
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="22.64"/>
Occupation		Interest on account
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.19"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="22.64"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="2063.81"/>



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

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

FOR LINE NUMBER:  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Alan E. Molotsky</p> <p>Mailing Address 3939 W. Greenwood</p> <p>City Skokie State IL Zip Code 60076</p> <p>Purpose of Disbursement Copying, postage &amp; supplies - internal non-solitation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6048 <b>Date of Disbursement</b> 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 127.93</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Moneris Solutions Inc.</p> <p>Mailing Address 700 East Lake Cook Road</p> <p>City Elk Grove Village State IL Zip Code 60089</p> <p>Purpose of Disbursement Credit card monthly processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6054 <b>Date of Disbursement</b> 07 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 55.00</p> <p>003 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Moneris Solutions Inc.</p> <p>Mailing Address 700 East Lake Cook Road</p> <p>City Elk Grove Village State IL Zip Code 60089</p> <p>Purpose of Disbursement Credit card monthly processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6055 <b>Date of Disbursement</b> 08 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 55.82</p> <p>003 Category/ Type</p>

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

238.75

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Moneris Solutions Inc.</p> <p>Mailing Address 700 East Lake Cook Road</p> <p>City Elk Grove Village State IL Zip Code 60089</p> <p>Purpose of Disbursement Credit card monthly processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6056 <b>Date of Disbursement</b> 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 55.00</p> <p>003 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Paypal</p> <p>Mailing Address 11128 John Galt Road</p> <p>City Omaha State NE Zip Code 68137</p> <p>Purpose of Disbursement Contribution processing charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6076 <b>Date of Disbursement</b> 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 31.53</p> <p>003 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Peggy P. Shapiro</p> <p>Mailing Address 4545 W. Touhy</p> <p>City Lincolnwood State IL Zip Code 60712</p> <p>Purpose of Disbursement Printing for PAC educational event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6052 <b>Date of Disbursement</b> 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 168.40</p> <p>004 Category/ Type</p>

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

254.93

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Peggy P. Shapiro	Transaction ID: SB21B.6053 Date of Disbursement 09 / 22 / 2010
	Mailing Address 4545 W. Touhy	Amount of Each Disbursement this Period 200.82
	City Lincolnwood State IL Zip Code 60712	
	Purpose of Disbursement For e-mail management service Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) The Mail Post	Transaction ID: SB21B.6049 Date of Disbursement 07 / 12 / 2010
	Mailing Address 2421 W. Pratt	Amount of Each Disbursement this Period 300.00
	City Chicago State IL Zip Code 60645	
	Purpose of Disbursement Postal service and postage - operating expense Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) US Post Office	Transaction ID: SB21B.6050 Date of Disbursement 07 / 07 / 2010
	Mailing Address Dirkson Federal Office Building	Amount of Each Disbursement this Period 660.00
	City Chicago State IL Zip Code 60604	
	Purpose of Disbursement Postage for mailings to members Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1160.82</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1654.50</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.

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

Transaction ID: SB23.6023  
Date of Disbursement

Mailing Address 6380 Wilshire Blvd. #1612

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

City State Zip Code  
Los Angeles CA 90048

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution to election campaign committee

011  
Category/  
Type

Candidate Name  
BERMAN FOR CONGRESS

Office Sought:  House  Senate  President  
State: CA District: 28  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
BLUNT, ROY

Transaction ID: SB23.6035  
Date of Disbursement

Mailing Address PO BOX 50100

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

City State Zip Code  
SPRINGFIELD MO 65805

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Contribution to election campaign committee

011  
Category/  
Type

Candidate Name  
BLUNT, ROY

Office Sought:  House  Senate  President  
State: MO District: 00  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
BURR, RICHARD

Transaction ID: SB23.6032  
Date of Disbursement

Mailing Address POST OFFICE BOX 5928

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

City State Zip Code  
WINSTON-SALEM NC 27113

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Contribution to election campaign committee

011  
Category/  
Type

Candidate Name  
BURR, RICHARD

Office Sought:  House  Senate  President  
State: NC District: 00  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

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

2000.00
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TOTAL This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>CONWAY FOR SENATE</b>  Mailing Address <b>PO BOX 6168</b>  City <b>LOUISVILLE</b> State <b>KY</b> Zip Code <b>40206</b> Purpose of Disbursement Contribution to election campaign committee Candidate Name <b>CONWAY FOR SENATE</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <b>KY</b> District: <b>00</b> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.6038 Date of Disbursement 09 / 17 / 2010	Amount of Each Disbursement this Period 250.00
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>COSTELLO FOR CONGRESS COMMITTEE</b>  Mailing Address <b>P. O. BOX 8250</b>  City <b>BELLEVILLE</b> State <b>IL</b> Zip Code <b>62222</b> Purpose of Disbursement Contribution to election campaign committee Candidate Name <b>COSTELLO FOR CONGRESS COMMITTEE</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>IL</b> District: <b>12</b> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.6044 Date of Disbursement 09 / 17 / 2010	Amount of Each Disbursement this Period 500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>DOLD FOR CONGRESS</b>  Mailing Address <b>PO Box 8145</b>  City <b>Northfield</b> State <b>IL</b> Zip Code <b>60093</b> Purpose of Disbursement Contribution to election campaign committee Candidate Name <b>DOLD FOR CONGRESS</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>IL</b> District: <b>10</b> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.6024 Date of Disbursement 09 / 13 / 2010	Amount of Each Disbursement this Period 1000.00

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

**1750.00**

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>DOLD FOR CONGRESS</b></p> <p>Mailing Address PO Box 8145</p> <p>City Northfield State IL Zip Code 60093</p> <p>Purpose of Disbursement Contribution to election campaign committee</p> <p>Candidate Name <b>DOLD FOR CONGRESS</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6045 <b>Date of Disbursement:</b> 09 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>ENGEL FOR CONGRESS</b></p> <p>Mailing Address 462 California Road</p> <p>City Bronxville State NY Zip Code 10708</p> <p>Purpose of Disbursement Contribution to election campaign committee</p> <p>Candidate Name <b>ENGEL FOR CONGRESS</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 17</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6026 <b>Date of Disbursement:</b> 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>HOYER FOR CONGRESS</b></p> <p>Mailing Address 7905 MALCOLM ROAD SUITE 102</p> <p>City CLINTON State MD Zip Code 20735</p> <p>Purpose of Disbursement Contribution to election campaign committee</p> <p>Candidate Name <b>HOYER FOR CONGRESS</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6034 <b>Date of Disbursement:</b> 09 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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

2500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
KINZINGER FOR CONGRESS

Mailing Address PO Box 1050

City State Zip Code  
Bourbonnais IL 60914

Purpose of Disbursement  
Contribution to election campaign committee

Candidate Name  
KINZINGER FOR CONGRESS

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: IL District: 11

**Transaction ID:** SB23.6028  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
KIRK FOR SENATE

Mailing Address P.O. Box 8

City State Zip Code  
Winnetka IL 60093

Purpose of Disbursement  
Contribution to election campaign committee

Candidate Name  
KIRK FOR SENATE

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: IL District: 10

**Transaction ID:** SB23.6046  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
MARCO RUBIO FOR US SENATE

Mailing Address 2030 SOUTH DOUGLAS ROAD SUITE 105

City State Zip Code  
CORAL GABLES FL 33134

Purpose of Disbursement  
Contribution to election campaign committee

Candidate Name  
MARCO RUBIO FOR US SENATE

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: FL District: 00

**Transaction ID:** SB23.6030  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
MARVIN SCOTT FOR CONGRESS 2010

Mailing Address PO BOX 88477

City INDIANAPOLIS State IN Zip Code 46208

Purpose of Disbursement  
Contribution to election campaign committee

011  
Category/  
Type

Candidate Name  
MARVIN SCOTT FOR CONGRESS 2010

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

State: IN District: 07

Transaction ID: SB23.6022  
Date of Disbursement

08 / 29 / 2010

Amount of Each Disbursement this Period

1500.00

**B.** Full Name (Last, First, Middle Initial)  
PETERS, GARY

Mailing Address PO BOX 226

City BLOOMFIELD HILLS State MI Zip Code 48303

Purpose of Disbursement  
Contribution to election campaign committee

011  
Category/  
Type

Candidate Name  
PETERS, GARY

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

State: MI District: 09

Transaction ID: SB23.6029  
Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
PORTMAN FOR SENATE COMMITTEE

Mailing Address 8331 LITTLE HARBOR DRIVE

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement  
Contribution to election campaign committee

011  
Category/  
Type

Candidate Name  
PORTMAN FOR SENATE COMMITTEE

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

State: OH District: 00

Transaction ID: SB23.6037  
Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

1000.00

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

3000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
**RANDY HULTGREN FOR CONGRESS**

Mailing Address PO Box 39

City State Zip Code  
Batavia IL 60510

Purpose of Disbursement  
Contribution to election campaign committee

Candidate Name  
**RANDY HULTGREN FOR CONGRESS**

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

State: IL District: 14

**Transaction ID:** SB23.6025  
Date of Disbursement

/

Amount of Each Disbursement this Period

Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
**SCHOCK FOR CONGRESS**

Mailing Address PO Box 10555

City State Zip Code  
Peoria IL 61612

Purpose of Disbursement  
Contribution to election campaign committee

Candidate Name  
**SCHOCK FOR CONGRESS**

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

State: IL District: 18

**Transaction ID:** SB23.6027  
Date of Disbursement

/

Amount of Each Disbursement this Period

Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
**SCHUMER, CHARLES E**

Mailing Address 509 MADISON AVE SUITE 1902

City State Zip Code  
NEW YORK NY 10022

Purpose of Disbursement  
Contribution to election campaign committee

Candidate Name  
**SCHUMER, CHARLES E**

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

State: NY District: 00

**Transaction ID:** SB23.6039  
Date of Disbursement

/

Amount of Each Disbursement this Period

Category/  
Type

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

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





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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Mr. Josh Mandel	Transaction ID: SB29.6062 Date of Disbursement
	Mailing Address 2112 Acadia Park Drive Suite 504	<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City Lyndhurst State OH Zip Code 44124	Amount of Each Disbursement this Period
	Purpose of Disbursement Contrib. to Non-Fed Campaign - Ohio State Treasurer's election	<input type="text" value="500.00"/>
	Candidate Name Mr. Josh Mandel	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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