



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Gutierrez For Congress**

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))....	26312.49	175305.38
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	26312.49	175305.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	43039.12	343309.82
(b) Total Offsets to Operating Expenditures (from Line 14).....	14.95	6104.65
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	43024.17	337205.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	212556.13	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	20000.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**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

**Gutierrez For Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 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).....	250.00	23968.05
(ii) Unitemized.....	1562.49	11335.22
(iii) TOTAL of contributions from individuals ▶	1812.49	35303.27
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	24500.00	140002.11
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	26312.49	175305.38
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	14.95	6104.65
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	3483.59
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	26327.44	184893.62

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	43039.12	343309.82
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	43039.12	343309.82

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	229267.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	26327.44
25. SUBTOTAL (add Line 23 and Line 24).....	255595.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	43039.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	212556.13

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

Committee corrected and amended Contribution from AT&T for \$1500.00. This contribution was posted in error and removed to correct and reflect correct posting.

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 25
	<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)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. Norman L Bleier</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 05 / 2014
Mailing Address 139 E. Blodgett		<b>Transaction ID : C18803137</b>
City Lake Bluff	State IL	
Zip Code 60044		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer CNC Consultant	Occupation Specialist in Sinumerk 840D CNC	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	
Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
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		
City	State	
Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
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).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	250.00

**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 25
	<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	

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial)  
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

A. Mailing Address 101 Constitution Ave NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

Transaction ID : C18803133

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address PO BOX 8250

City State Zip Code  
Belleville IL 62222

FEC ID number of contributing federal political committee. **C** C00238444

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

Transaction ID : C18803132

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 1400 16th Street, NW Suite 600

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00262295

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

Transaction ID : C18803272

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<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 8 OF 25
	<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	

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DELOITTE & TOUCHE FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address P.O. Box 365

City Washington State DC Zip Code 20044

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  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : C18803130**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**DELOITTE & TOUCHE FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address P.O. Box 365

City Washington State DC Zip Code 20044

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  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : C18803271**

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
**ERNST & YOUNG POLITICAL ACTION COMMITTEE**

Mailing Address 1101 New York Avenue, NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : C18803131**

Amount of Each Receipt this Period  
2500.00

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

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

7500.00



**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 25
<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	

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pallone For Congress**

Mailing Address **PO BOX 3176**

City **LONG BRANCH** State **NJ** Zip Code **07740**

FEC ID number of contributing federal political committee. **C C00226928**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 10 / 2014**

**Transaction ID : C18803138**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I**

Mailing Address **1301 K Street, NW Suite 800W**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 16 / 2014**

**Transaction ID : C18803135**

Amount of Each Receipt this Period  
**2000.00**

**C.** Full Name (Last, First, Middle Initial)  
**REALTORS POLITICAL ACTION COMMITTEE**

Mailing Address **430 NORTH MICHIGAN AVE**

City **CHICAGO** State **IL** Zip Code **60611**

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 **7000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : C18803134**

Amount of Each Receipt this Period  
**3000.00**

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

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

**7000.00**

**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 25
	<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	

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UNIVISION COMMUNICATIONS INC. POLITICAL ACTION COM**

Mailing Address 3699 Wilshire Blvd  
Ste 1290

City Los Angeles State CA Zip Code 90010-2732

FEC ID number of contributing federal political committee. **C** C00435735

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : C18803274**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Verizon Communicationns Inc.**

Mailing Address 1300 I St NW 4th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C18803270**

Amount of Each Receipt this Period  
1000.00

**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).....

2000.00

24500.00

**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 11 OF 25			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. American Airlines Travel Center</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 12 / 2014</b>
Mailing Address <b>776 K. Street, NW</b>			Amount of Each Disbursement this Period <b>730.00</b> Transaction ID : <b>D423301</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20006</b>	
Purpose of Disbursement <b>Travel exp. 6/27 Udall</b>		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) <b>B. American Airlines Travel Center</b>			Date of Disbursement M M / D D / Y Y Y Y <b>05 / 21 / 2014</b>
Mailing Address <b>776 K. Street, NW</b>			Amount of Each Disbursement this Period <b>816.00</b> Transaction ID : <b>D423302</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20006</b>	
Purpose of Disbursement <b>Travel exp. Candidate and spouse</b>		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) <b>C. American Airlines Travel Center</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 16 / 2014</b>
Mailing Address <b>776 K. Street, NW</b>			Amount of Each Disbursement this Period <b>457.00</b> Transaction ID : <b>D423303</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20006</b>	
Purpose of Disbursement <b>Travel exp. 6/22/14</b>		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2003.00</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 12 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. At&amp;T Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address PO Box 8220		Amount of Each Disbursement this Period 173.30 <b>Transaction ID : D423210</b>
City Aurora	State IL	
Purpose of Disbursement Bus. phone	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) <b>B. At&amp;T Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address PO Box 8220		Amount of Each Disbursement this Period 173.32 <b>Transaction ID : D423211</b>
City Aurora	State IL	
Purpose of Disbursement Bus. Phone	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) <b>C. At&amp;T Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2014
Mailing Address PO Box 8220		Amount of Each Disbursement this Period 173.32 <b>Transaction ID : D423212</b>
City Aurora	State IL	
Purpose of Disbursement Bus. Phone	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).....	519.94
<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 13 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. Bob Menendez For Senate</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 777 S. Figueroa St. #450			Amount of Each Disbursement this Period 2600.00 <b>Transaction ID : D423320</b>
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name <b>Bob Menendez</b>			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: NJ	District:		

Full Name (Last, First, Middle Initial) <b>B. Cava Mezze</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 527 8th Street, SE			Amount of Each Disbursement this Period 74.42 <b>Transaction ID : D423223</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Meal		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. City of Chicago</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 121 N. LaSalle			Amount of Each Disbursement this Period 245.00 <b>Transaction ID : D423304</b>
City Chicago	State IL	Zip Code 60601	
Purpose of Disbursement Bus. Car expense		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2919.42
<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 14 OF 25	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial)  
**A. Department of the Treasury (IRS)**

Mailing Address 324 25th St.

City Ogden State UT Zip Code 84401

Purpose of Disbursement USA tax payment IRS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 29 / 2014

Amount of Each Disbursement this Period: 120.75

Transaction ID : D423313

Full Name (Last, First, Middle Initial)  
**B. Department of the Treasury (IRS)**

Mailing Address 324 25th St.

City Ogden State UT Zip Code 84401

Purpose of Disbursement USA tax payment IRS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 29 / 2014

Amount of Each Disbursement this Period: 120.75

Transaction ID : D423314

Full Name (Last, First, Middle Initial)  
**C. Department of the Treasury (IRS)**

Mailing Address 324 25th St.

City Ogden State UT Zip Code 84401

Purpose of Disbursement USA tax payment IRS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 27 / 2014

Amount of Each Disbursement this Period: 120.75

Transaction ID : D423315

**SUBTOTAL** of Disbursements This Page (optional) ..... 362.25

**TOTAL** 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 15 OF 25	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. Department of Treasury Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 29 / 2014</b>
Mailing Address <b>PO BOX 19043</b>		Amount of Each Disbursement this Period <b>225.00</b> <b>Transaction ID : D423310</b>
City <b>Springfield</b> State <b>IL</b> Zip Code <b>62794</b>	Purpose of Disbursement <b>Il Dept. of revenue withholding</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Department of Treasury Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 29 / 2014</b>
Mailing Address <b>PO BOX 19043</b>		Amount of Each Disbursement this Period <b>225.00</b> <b>Transaction ID : D423311</b>
City <b>Springfield</b> State <b>IL</b> Zip Code <b>62794</b>	Purpose of Disbursement <b>Il Dept. of revenue withholding</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Department of Treasury Illinois Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 27 / 2014</b>
Mailing Address <b>PO BOX 19043</b>		Amount of Each Disbursement this Period <b>225.00</b> <b>Transaction ID : D423312</b>
City <b>Springfield</b> State <b>IL</b> Zip Code <b>62794</b>	Purpose of Disbursement <b>Il Dept. of revenue withholding</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>675.00</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 16 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. Erie Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 536 W. Erie St.		Amount of Each Disbursement this Period 921.87 <b>Transaction ID : D423243</b>
City Chicago	State IL Zip Code 60654	
Purpose of Disbursement Meal	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 399.00 <b>Transaction ID : D423213</b>
City Omaha	State NE Zip Code 68154	
Purpose of Disbursement Bus. Vehicle	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" 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. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 399.00 <b>Transaction ID : D423214</b>
City Omaha	State NE Zip Code 68154	
Purpose of Disbursement Bus. Vehicle	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" 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).....	921.87
<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 17 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address PO Box 542000		Amount of Each Disbursement this Period 399.00
City Omaha	State NE	
Zip Code 68154	Purpose of Disbursement Bus. Vehicle	Transaction ID : D423215
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) <b>B. Soraida Gutierrez</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 5310 W.Cullom Ave.		Amount of Each Disbursement this Period 4500.00
City Chicago	State IL	
Zip Code 60641	Purpose of Disbursement Office Manager, treasurer and fundraising	Transaction ID : D423307
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Soraida Gutierrez</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 5310 W.Cullom Ave.		Amount of Each Disbursement this Period 4500.00
City Chicago	State IL	
Zip Code 60641	Purpose of Disbursement Office Manager, treasurer and fundraising	Transaction ID : D423308
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9399.00
<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 18 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. Soraida Gutierrez</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2014
Mailing Address 5310 W.Cullom Ave.		Amount of Each Disbursement this Period 9,999.99 4500.00
City Chicago	State IL Zip Code 60641	
Purpose of Disbursement Office Manager, treasurer and fundraising		<b>Transaction ID : D423309</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Immigration Reform Fund</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 236 MASSACHUSETTS AVENUE NE SUITE 603		Amount of Each Disbursement this Period 9,999.99 5000.00
City WASHINGTON	State DC Zip Code 20002	
Purpose of Disbursement Contribution		<b>Transaction ID : D423221</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. J&amp;K Consultants, Inc</b>		Date of Disbursement MM / DD / YYYY 05 / 08 / 2014
Mailing Address 4507 W. Lawrence Ave.		Amount of Each Disbursement this Period 9,999.99 125.00
City Chicago	State IL Zip Code 60630	
Purpose of Disbursement Accounting fee services		<b>Transaction ID : D423245</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9625.00
<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 19 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. J&amp;K Consultants, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 4507 W. Lawrence Ave.		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : D423285</b>
City Chicago State IL Zip Code 60630	Purpose of Disbursement Accounting fee services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. J&amp;K Consultants, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address 4507 W. Lawrence Ave.		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : D423289</b>
City Chicago State IL Zip Code 60630	Purpose of Disbursement Accounting fee services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mary Rose Wilcox For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address PO BOX 24507		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : D423222</b>
City PHOENIX State AZ Zip Code 85074	Purpose of Disbursement Political Contribution	
Candidate Name <b>MARY ROSE R WILCOX</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2250.00
<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 20 OF 25	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

**A. MENENDEZ FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 848

City Union City State NJ Zip Code 07087

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: NJ District: 13

Date of Disbursement: 05 / 19 / 2014

Amount of Each Disbursement this Period: 2600.00

Transaction ID : D423220

**B. Miller Chevalier**

Full Name (Last, First, Middle Initial)  
Mailing Address 655 Fifteenth St., N.W., Suite 900

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Professional legal services

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 06 / 2014

Amount of Each Disbursement this Period: 5100.00

Transaction ID : D423218

**c. Mio Restaurant**

Full Name (Last, First, Middle Initial)  
Mailing Address 1110 Vermont Ave. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Meal

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 24 / 2014

Amount of Each Disbursement this Period: 556.73

Transaction ID : D423291

**SUBTOTAL** of Disbursements This Page (optional) ..... 8256.73

**TOTAL** 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 21 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP SOFTWARE Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 1225 Eye St. NW		Amount of Each Disbursement this Period 2107.83 <b>Transaction ID : D423216</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Quarterly service fee	
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) <b>B. Judy Pedroza</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 1728 N. Karlov		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : D423219</b>
City Chicago State IL Zip Code 60639	Purpose of Disbursement Donation childrens scoccer team	
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) <b>c. PF Changs</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 901 N. Glebe Rd		Amount of Each Disbursement this Period 57.83 <b>Transaction ID : D423239</b>
City Arlington State VA Zip Code 22203	Purpose of Disbursement Meal	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2107.83
<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 22 OF 25	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 7000 West Forest Preserve Dr.		Amount of Each Disbursement this Period 2.63
City Norridge State IL Zip Code 60634	Purpose of Disbursement Office Exp	
Candidate Name	Category/Type	Transaction ID : D423231
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 7000 West Forest Preserve Dr.		Amount of Each Disbursement this Period 72.40
City Norridge State IL Zip Code 60634	Purpose of Disbursement office supplies printer ink online	
Candidate Name	Category/Type	Transaction ID : D423256
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. State Of Illinois Department of Employment Security</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 33 South State St.		Amount of Each Disbursement this Period 20.73
City Chicago State IL Zip Code 60603	Purpose of Disbursement State of IL Employer Contribution	
Candidate Name	Category/Type	Transaction ID : D423316
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	95.73
<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 23 OF 25			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. Trattoria Alberto</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014		
Mailing Address 506 8th Street SE			Amount of Each Disbursement this Period 201.00		
City Washington	State DC	Zip Code 20003	Transaction ID : <b>D423263</b>		
Purpose of Disbursement Meal		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Trattoria Alberto</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014		
Mailing Address 506 8th Street SE			Amount of Each Disbursement this Period 181.00		
City Washington	State DC	Zip Code 20003	Transaction ID : <b>D423225</b>		
Purpose of Disbursement Meal		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:					

Full Name (Last, First, Middle Initial) <b>c. United Airlines DC</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014		
Mailing Address 1025 Connecticut Ave			Amount of Each Disbursement this Period 917.00		
City Washington	State DC	Zip Code 20036	Transaction ID : <b>D423298</b>		
Purpose of Disbursement Travel exp. for 4/30		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1299.00
<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 24 OF 25	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gutierrez For Congress**

Full Name (Last, First, Middle Initial) <b>A. United Airlines DC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1025 Connecticut Ave		Amount of Each Disbursement this Period 447.01 <b>Transaction ID : D423299</b>
City Washington State DC Zip Code 20036	Purpose of Disbursement Travel exp. 5/23	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airlines DC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1025 Connecticut Ave		Amount of Each Disbursement this Period 224.00 <b>Transaction ID : D423300</b>
City Washington State DC Zip Code 20036	Purpose of Disbursement Travel exp. 5/24	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LUIS V GUTIERREZ</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 5310 W Cullom Ave		Amount of Each Disbursement this Period 20.14 <b>Transaction ID : D423317</b>
City Chicago State IL Zip Code 60641-1304	Purpose of Disbursement Reimbursement (itemized below greater then \$200)	
Candidate Name <b>Luis V Gutierrez</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	691.15
<b>TOTAL</b> This Period (last page this line number only).....	41125.95



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gutierrez For Congress** Transaction ID : **L854**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Centro Sin Fronteras</b>	Election: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2716 W Division St	

City	State	ZIP Code
Chicago	IL	60622-2853

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	5000.00	20000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
10 / 12 / 2010	10/21/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="20000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text" value="20000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.