

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED

2014 JUL 21 AM 10:35

Office Use Only

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

FEC-MAIL CENTER
12FE4M5

ELECT A NEW CONGRESS

ADDRESS (number and street)

617 Ridge St

Check if different than previously reported. (ACC)

GALENA

IL

61034

2. **FEC IDENTIFICATION NUMBER ▼**

CITY ▲

STATE ▲

ZIP CODE ▲

00522839

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

(c) 12-Day **PRE-Election** Report for the:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on

MM/DD/YYYY 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

MM/DD/YYYY in the State of

5. Covering Period

04 / 01 / 2014

through

06 / 30 / 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 **William W Fawell**

Signature of Treasurer

William W. Fawell

Date

07 / 14 / 2014

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ELECT A NEW CONGRESS

Report Covering the Period: From:

MM / DD / YYYY
04 / 01 / 2014

To:

MM / DD / YYYY
06 / 30 / 2014

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	105	1,105.66
(b) Cash on Hand at Beginning of Reporting Period.....	1,056.66	
(c) Total Receipts (from Line 19)	5,150.00	6,150.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5,255.66	6,150.66
7. Total Disbursements (from Line 31)	5,035.50	6,035.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	220.16	220.16
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	



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)

Page 3

Write or Type Committee Name

ELECT A NEW CONGRESS

Report Covering the Period: From:

04 / 01 / 2014

To:

06 / 30 / 2014

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

(i) Itemized (use Schedule A).....

5,150.00

6,150.00

(ii) Unitemized

(iii) TOTAL (add
Lines 11(a)(i) and (ii).....▶

5,150.00

6,150.00

(b) Political Party Committees

(c) Other Political Committees
(such as PACs).....

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

12. Transfers From Affiliated/Other
Party Committees.....

13. All Loans Received

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....

17. Other Federal Receipts
(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

5,150.00

6,150.00

20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

5,150.00
50,355.50

0,150.00
60,355.50

1403172010

**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)

PAGE **7** OF **8**

<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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

ELECT A NEW CONGRESS

Full Name (Last, First, Middle Initial)

A.

ELIGHTENMENT LLC

Date of Disbursement

Mailing Address

1319 EVERETT AV

05 / 19 / 2014

City **DES PLAINES** State **IL** Zip Code **60018**

Purpose of Disbursement

LIBERTARIAN PARTY

Amount of Each Disbursement this Period

Candidate Name

NONE

Category/Type

3500.00

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

Full Name (Last, First, Middle Initial)

B.

Judy BERLINSKI

Date of Disbursement

Mailing Address

22058 Cumberland Dr.

05 / 24 / 2014

City **NORTHVILLE, MI** State **MI** Zip Code **48167**

Purpose of Disbursement

EDITING

Amount of Each Disbursement this Period

Candidate Name

Category/Type

1200.00

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

Full Name (Last, First, Middle Initial)

C.

TEKNIQRAMATON Graphics

Date of Disbursement

Mailing Address

7212 N. HAMILTON

06 / 14 / 2014

City **Chicago** State **IL** Zip Code **60645**

Purpose of Disbursement

ARTWORK

Amount of Each Disbursement this Period

Candidate Name

Category/Type

217.50

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

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

4917.50

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

5035.50

14801111-100100

**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)						PAGE 8 OF 8				
	<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 type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
ELECT A NEW CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y - Y Y 06 / 17 / 2014	
Mailing Address		Amount of Each Disbursement this Period 118.00	
City State Zip Code		Category/Type	
Purpose of Disbursement PHONE / COMPUTER		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.		Date of Disbursement M M / D D / Y Y - Y Y	
Mailing Address		Amount of Each Disbursement this Period	
City State Zip Code		Category/Type	
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y - Y Y	
Mailing Address		Amount of Each Disbursement this Period	
City State Zip Code		Category/Type	
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	, , 118.00
TOTAL This Period (last page this line number only).....▶	, , .

110301-1001-201408

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DATE OF DELIVERY SPECIFIED*

USPS TRACKING™ INCLUDED*

INSURANCE INCLUDED*

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* Domestic only

INTERNATIONALLY, CUSTOMS DECLARATION LABEL MAY BE REQUIRED.



140001000000

EPI4F July 2013
OD: 12.5 x 9.5

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PAID
GALENA, IL
61036
JUL 16, 14
AMOUNT

\$5.60
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20463



1006

FROM:



For Domestic
and International Use

PRIORITY MAIL

UNITED STATES POSTAL SERVICE

From ELECTANEUKONGNESS
617 Dodge St
Galeena, IL 61036

TO QTR REPORTS
FEC
999 E STREET N.W
WASHINGTON DC
20463



USPS TRACKING #



9114 9012 3080 3766 9812 55

3, January 2009

Label 400 Jan. 2013
7690-16-000-7948

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