

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
DAN LIPINSKI FOR CONGRESS

ADDRESS (number and street) P.O. BOX 520
 Check if different than previously reported. (ACC) WESTERN SPRINGS IL 60558

2. **FEC IDENTIFICATION NUMBER** C C00405431 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
IL 03

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 03 / 07 / 2014 in the State of IL
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 01 / 01 / 2014 through 02 / 26 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Jerome R. Hurckes
Signature of Treasurer Jerome R. Hurckes *[Electronically Filed]* Date 04 / 15 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
DAN LIPINSKI 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))....	15470.00	434210.04
(b) Total Contribution Refunds (from Line 20(d))	0.00	6500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15470.00	427710.04
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	50978.68	294921.49
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	5003.86
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	50978.68	289917.63
8. Cash on Hand at Close of Reporting Period (from Line 27).....	944845.17	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY 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

DAN LIPINSKI FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9150.00	131320.00
(ii) Unitemized	320.00	7540.04
(iii) TOTAL of contributions from individuals	9470.00	138860.04
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	295350.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15470.00	434210.04
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	5003.86
15. OTHER RECEIPTS (Dividends, Interest, etc.)	295.51	593.60
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	15765.51	439807.50

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	50978.68	294921.49
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	6500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	6500.00
21. OTHER DISBURSEMENTS	100.00	4900.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	51078.68	306321.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	980158.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15765.51
25. SUBTOTAL (add Line 23 and Line 24).....	995923.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	51078.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	944845.17

**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 5 OF 22
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. John H. Dik		Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 6418 Big Bear Court		Transaction ID : SA11AI.17916	
City Indian Head Park	State IL	Zip Code 60525	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer Self employed	Occupation Dik Drugs		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) B. Gary Elden		Date of Receipt M M / D D / Y Y Y Y 01 / 20 / 2014	
Mailing Address 111 S. Wacker Drive		Transaction ID : SA11AI.18087	
City Chicago	State IL	Zip Code 60606	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Grippo & Elden, LLC	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. KYLE HARDING		Date of Receipt M M / D D / Y Y Y Y 02 / 11 / 2014	
Mailing Address 600 N. KINGSBURY		Transaction ID : SA11AI.17917	
City CHICAGO	State IL	Zip Code 60654	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer REQUESTED	Occupation REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

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

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

FOR LINE NUMBER: PAGE 6 OF 22
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DAN LIPINSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DALE HAWK

Mailing Address 147 WATER OAK

City State Zip Code
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation REQUESTED REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014

Transaction ID : SA11AI.17919

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Jack Levin

Mailing Address 985 Sheridan Road

City State Zip Code
Winnetka IL 60093

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

Name of Employer Occupation Kirkland and Ellis Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2014

Transaction ID : SA11AI.18090

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Dan Maeir

Mailing Address 4141 Grove

City State Zip Code
Skokie IL 60076

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

Name of Employer Occupation Pelstar, LLC President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2014

Transaction ID : SA11AI.18092

Amount of Each Receipt this Period
 2600.00

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

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

3400.00

**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 22
	<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	

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NAME OF COMMITTEE (In Full)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) Lawrence Margolis		Date of Receipt M M / D D / Y Y Y Y 01 / 20 / 2014	
Mailing Address 4212 Forest Avenue		Transaction ID : SA11AI.18089	
City Western Springs	State IL	Zip Code 60558	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer self employed	Occupation attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) David Seligman		Date of Receipt M M / D D / Y Y Y Y 01 / 20 / 2014	
Mailing Address 1323 W. Henderson Street		Transaction ID : SA11AI.18085	
City Chicago	State IL	Zip Code 60657	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Kirkland & Ellis	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) BARBARA SILVERMAN		Date of Receipt M M / D D / Y Y Y Y 02 / 05 / 2014	
Mailing Address 755 SHERIDAN ROAD		Transaction ID : SA11AI.17923	
City WINNETKA	State IL	Zip Code 60093	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer REQUESTED	Occupation REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 22
	<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	

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NAME OF COMMITTEE (In Full)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Marcus Wedner		Date of Receipt M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 3 Kent Road		Transaction ID : SA11Al.17925
City Winnetka	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CIVIC	Occupation Investor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
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) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
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	

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	9150.00

**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 22
<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)
DAN LIPINSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN COMMERCIAL LINES INC. PAC

Mailing Address 1701 EAST MARKET STREET

City State Zip Code
JEFFERSONVILLE IN 47130

FEC ID number of contributing federal political committee. **C** C00418269

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 23 / 2014

Transaction ID : SA11C.17901

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BOMBARDIER CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 2200 PENNSYLVANIA AVE NW, STE 660W

City State Zip Code
WASHINGTON DC 20037

FEC ID number of contributing federal political committee. **C** C00546473

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 23 / 2014

Transaction ID : SA11C.17903

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Drive Committee

Mailing Address 25 Louisiana Avenue NW

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 23 / 2014

Transaction ID : SA11C.17905

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
	<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)
DAN LIPINSKI FOR CONGRESS

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

Mailing Address 2345 Crystal Drive

City Arlington State VA Zip Code 22202

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 23 / 2014

Transaction ID : SA11C.17910

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 Pennsylvania Ave NW Suite 900W

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11C.17911

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
NACO RESPONSIBLE DISTRIBUTION PAC

Mailing Address 1555 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22209

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11C.17912

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

6000.00

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

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

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NAME OF COMMITTEE (In Full)
DAN LIPINSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STATE OF ILLINOIS

Mailing Address 325 WEST ADAMS

City Springfield State IL Zip Code 62704

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
295.51

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014

Transaction ID : SA15.17926

Amount of Each Receipt this Period
 295.51
 STATE REFUND TAX

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

295.51

295.51

**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 22	
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT & T-Carol Stream		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address P.O. Box 5080		Amount of Each Disbursement this Period 6,000.00 186.13
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone	Transaction ID : SB17.17930
Candidate Name	Category/ Type	
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. AT & T-Carol Stream		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address P.O. Box 5080		Amount of Each Disbursement this Period 6,000.00 299.95
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone	Transaction ID : SB17.17931
Candidate Name	Category/ Type	
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. AT & T-Carol Stream		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address P.O. Box 5080		Amount of Each Disbursement this Period 6,000.00 187.38
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone	Transaction ID : SB17.17932
Candidate Name	Category/ Type	
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).....	673.46
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 13 OF 22			
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Breaker Press Co., Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 2421 S. Western Avenue		Amount of Each Disbursement this Period 30685.33 Transaction ID : SB17.17933
City Chicago	State IL Zip Code 60608	
Purpose of Disbursement Christmas card package	Candidate Name	Category/ Type
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. Breaker Press Co., Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 2421 S. Western Avenue		Amount of Each Disbursement this Period 6020.00 Transaction ID : SB17.17934
City Chicago	State IL Zip Code 60608	
Purpose of Disbursement Christmas card package	Candidate Name	Category/ Type
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. Catering by Avalon		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 770 5th Street NW		Amount of Each Disbursement this Period 603.49 Transaction ID : SB17.17935
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Catering	Candidate Name	Category/ Type
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).....	37308.82
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 14 OF 22	
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City News Hound		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address Bill Payment Center		Amount of Each Disbursement this Period 220.50 Transaction ID : SB17.17936
City Chicago	State IL Zip Code 60628	
Purpose of Disbursement Advertising	Category/Type	
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. Elizabeth Cukrowski		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 7845 W. 99th Place		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.17939
City Palos Hills	State IL Zip Code 60465	
Purpose of Disbursement Cleaning	Category/Type	
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. Elizabeth Cukrowski		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 7845 W. 99th Place		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.17940
City Palos Hills	State IL Zip Code 60465	
Purpose of Disbursement Cleaning	Category/Type	
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).....	340.50
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 22	
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Elizabeth Cukrowski		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 7845 W. 99th Place		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.17941
City Palos Hills	State IL Zip Code 60465	
Purpose of Disbursement Cleaning	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Enterprise Newspaper		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address P.O. Box 892		Amount of Each Disbursement this Period 204.80 Transaction ID : SB17.17972
City Plainfield	State IL Zip Code 60544	
Purpose of Disbursement Advertising	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Home Run Inn		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 6221 S. Archer Avenue		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.17946
City Chicago	State IL Zip Code 60638	
Purpose of Disbursement Rent	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	764.80
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 16 OF 22	
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Illinois Department of Revenue		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address P.O. Box 19447		Amount of Each Disbursement this Period 33.00 Transaction ID : SB17.17947
City Springfield	State IL	
Zip Code 62794	Purpose of Disbursement Taxes	Category/ Type
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. Kenny & Kenny, PC		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 1400 West 47th Street		Amount of Each Disbursement this Period 675.00 Transaction ID : SB17.17953
City LaGrange	State IL	
Zip Code 60525	Purpose of Disbursement Accounting	Category/ Type
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. Eric Lausten		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 4801 4th Street		Amount of Each Disbursement this Period 693.50 Transaction ID : SB17.17943
City Washington	State DC	
Zip Code 20011	Purpose of Disbursement Wages	Category/ Type
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).....	1401.50
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 17 OF 22			
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Eric Lausten			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014		
Mailing Address 4801 4th Street			Amount of Each Disbursement this Period 743.50		
City Washington	State DC	Zip Code 20011	Transaction ID : SB17.17945		
Purpose of Disbursement Wages		Category/ Type			
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. Elaine McCarthy			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014		
Mailing Address 5838 Archer Avenue			Amount of Each Disbursement this Period 375.00		
City Chicago	State IL	Zip Code 60638	Transaction ID : SB17.17937		
Purpose of Disbursement Wages		Category/ Type			
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. Elaine McCarthy			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014		
Mailing Address 5838 Archer Avenue			Amount of Each Disbursement this Period 375.00		
City Chicago	State IL	Zip Code 60638	Transaction ID : SB17.17938		
Purpose of Disbursement Wages		Category/ Type			
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)	1493.50
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 18 OF 22	
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Megan Hurckes Scholarship Fund		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 4646 W. 103rd Street		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.17954
City State Zip Code Oak Lawn IL 60453	Purpose of Disbursement Donation	
Candidate Name	Category/Type	
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. Northwestern University		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 633 Clark Street		Amount of Each Disbursement this Period 758.00 Transaction ID : SB17.17955
City State Zip Code Evanston IL 60208	Purpose of Disbursement Football tickets	
Candidate Name	Category/Type	
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. Paypal		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2014
Mailing Address Bill Payment Center		Amount of Each Disbursement this Period 334.33 Transaction ID : SB17.18082
City State Zip Code Chicago IL 60618	Purpose of Disbursement Pay pay 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:		

SUBTOTAL of Disbursements This Page (optional).....	1342.33
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 19 OF 22	
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 6456 W. Archer		Amount of Each Disbursement this Period 92.00
City Chicago	State IL Zip Code 60638	
Purpose of Disbursement Postage	Category/Type	Transaction ID : SB17.17958
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. John Rattiff		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 9911 Indian Falls Drive		Amount of Each Disbursement this Period 1000.00
City Louisville	State KY Zip Code 40229	
Purpose of Disbursement Web and internet	Category/Type	Transaction ID : SB17.17950
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. Rolla Group, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 2201 2nd Street NW		Amount of Each Disbursement this Period 4000.00
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Fundraiser	Category/Type	Transaction ID : SB17.17960
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).....	5092.00
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 20 OF 22	
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. South Side Irish Parade		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 5450 95th Street		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.17961
City Chicago	State IL Zip Code 60636	
Purpose of Disbursement Application fee	Category/Type	
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. Southwest Community Newspapers		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 6225 S. Kedzie Ave.		Amount of Each Disbursement this Period 345.00 Transaction ID : SB17.17963
City Chicago	State IL Zip Code 60629-3330	
Purpose of Disbursement Advertising	Category/Type	
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. Southwest Messenger		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 3840 W. 147th Street		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.17962
City Midlothian	State IL Zip Code 60445	
Purpose of Disbursement Christmas message	Category/Type	
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).....	1595.00
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 22			
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sprint		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address P.O. Box 219100		Amount of Each Disbursement this Period 19.86
City Kansas City	State MO	
Zip Code 64121	Purpose of Disbursement Telephone	Transaction ID : SB17.17964
Candidate Name	Category/ Type	
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. Sprint		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address P.O. Box 219100		Amount of Each Disbursement this Period 40.02
City Kansas City	State MO	
Zip Code 64121	Purpose of Disbursement Telephone	Transaction ID : SB17.17965
Candidate Name	Category/ Type	
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. Together We Cope		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 17010 S. Oak Park Ave.		Amount of Each Disbursement this Period 175.00
City Tinley Park	State IL	
Zip Code 60477	Purpose of Disbursement Donation	Transaction ID : SB17.17968
Candidate Name	Category/ Type	
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).....	234.88
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 22 OF 22	
	<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)
DAN LIPINSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Village of Tinley Park		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 16250 S. Oak Park Avenue		Amount of Each Disbursement this Period 100.00
City Tinley Park	State IL	
Zip Code 60477	Purpose of Disbursement Donation	Transaction ID : SB17.17971
Candidate Name	Category/ Type	
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	Purpose of Disbursement	
Candidate Name	Category/ Type	
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	Purpose of Disbursement	
Candidate Name	Category/ Type	
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).....	100.00
TOTAL This Period (last page this line number only).....	50346.79