

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
Bobby Schilling for Congress

ADDRESS (number and street) 367 Avenue of The Cities Suite D
 Check if different than previously reported. (ACC) East Moline IL 61244

2. **FEC IDENTIFICATION NUMBER** C C00459354 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT
IL 17

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

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
02 / 27 / 2014 through 03 / 31 / 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 Mr. Mitch Heckenkamp
Signature of Treasurer Mr. Mitch Heckenkamp *[Electronically Filed]* Date M M / D D / Y Y Y Y
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

Bobby Schilling for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 02 / 27 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

	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))....	90348.15	422163.46
(b) Total Contribution Refunds (from Line 20(d))	0.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	90348.15	419663.46
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28084.00	186340.24
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	7928.31
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	28084.00	178411.93
8. Cash on Hand at Close of Reporting Period (from Line 27).....	332115.98	
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).....	10000.00	

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

Bobby Schilling 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).....	39075.98	247755.61
(ii) Unitemized.....	18615.97	61885.85
(iii) TOTAL of contributions from individuals ▶	57691.95	309641.46
(b) Political Party Committees.....	1000.00	10175.00
(c) Other Political Committees (such as PACs).....	31656.20	102347.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	90348.15	422163.46
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	1353.05
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	7928.31
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	90348.15	431444.82

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	28084.00	186340.24
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	2500.00
(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	2500.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	28084.00	188840.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	269851.83
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	90348.15
25. SUBTOTAL (add Line 23 and Line 24).....	360199.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28084.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	332115.98

**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 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Kevin Hogan

Mailing Address 10715 Turkey Hollow Road

City State Zip Code
Taylor Ridge IL 61284

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

Name of Employer Occupation
Rock Island Auction Co Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : 0015659

Amount of Each Receipt this Period
2500.00

IN-KIND: Computer Equipment

B. Full Name (Last, First, Middle Initial)
Mr. Richard McClimon

Mailing Address 810 Oriole Court

City State Zip Code
Geneseo IL 61254

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

Name of Employer Occupation
McClimon Pharmacy Pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 02 / 2014

Transaction ID : 0015456

Amount of Each Receipt this Period
1000.00

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

Mailing Address 921 E. Wells St

City State Zip Code
Geneseo IL 61254

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

Name of Employer Occupation
Emmerson Excavating Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 02 / 2014

Transaction ID : 0015465

Amount of Each Receipt this Period
200.00

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

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

3700.00

**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 6 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Maurice Atwell

Mailing Address 403 S. Oakwood Ave

City State Zip Code
Geneseo IL 61254

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 02 / 2014

Transaction ID : 0015466

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Ruth M Thornton

Mailing Address 2 Goembel Court

City State Zip Code
Colona IL 61241

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 05 / 2014

Transaction ID : 0015471

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Dean L. Buntrock

Mailing Address One Tower Lane, Suite 2242

City State Zip Code
Villa Park IL 60181

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 05 / 2014

Transaction ID : 0015473

Amount of Each Receipt this Period
2600.00

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

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

5450.00

**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 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Patrick Cunningham

Mailing Address 2706 29th Ave

City State Zip Code
Rock Island IL 61201

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2014

Transaction ID : 0015480

Amount of Each Receipt this Period
500.00

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

Mailing Address 2237 Greendale Dr.

City State Zip Code
Springfield IL 62704

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : 0015485

Amount of Each Receipt this Period
250.00

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

Mailing Address 800 N Michigan Ave Apt. 2201

City State Zip Code
Chicago IL 60611-2149

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

Name of Employer Occupation
Maclean-Fogg Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : 0015490

Amount of Each Receipt this Period
2500.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Mary Ann Stoffel

Mailing Address 5324 36th Ave Ct

City Moline State IL Zip Code 61265

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

Name of Employer physician/Office manager Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : 0015492

Amount of Each Receipt this Period
500.00

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

Mailing Address 313 U.S. Hwy 34

City Kirkwood State IL Zip Code 61447

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : 0015493

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Pierre Loomis

Mailing Address 1609 East Broadway

City Monmouth State IL Zip Code 61462

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : 0015497

Amount of Each Receipt this Period
100.00

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

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

1100.00

**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 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Russell Koster

Mailing Address 1500 E. 38th St

City Sterling State IL Zip Code 61081

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **801.93**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : 0015498

Amount of Each Receipt this Period
400.98

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

Mailing Address 205 Seminole Dr

City Galesburg State IL Zip Code 61401

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **288.54**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : 0015499

Amount of Each Receipt this Period
25.00

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

Mailing Address 1931 34th St

City Moline State IL Zip Code 61265

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

Name of Employer Dept of Defense Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : 0015501

Amount of Each Receipt this Period
2000.00

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

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

2425.98

**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 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
David Ransburg

Mailing Address 509 E. High Point Road

City Peoria State IL Zip Code 61614

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

Name of Employer LR Nelson Corp Occupation Chief Executive Officer

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
 03 / 16 / 2014

Transaction ID : 0015507

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Julie Bush

Mailing Address 6800 78th Ave West

City Milan State IL Zip Code 61264

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

Name of Employer Self Employed Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015508

Amount of Each Receipt this Period
250.00

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

Mailing Address 163 Oakwood Pl

City Geneseo State IL Zip Code 61254

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015511

Amount of Each Receipt this Period
100.00

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

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

1350.00

**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 49
	<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)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. John F. Green		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2014	
Mailing Address RR 1 Box 68		Transaction ID : 0015514	
City Little York	State IL	Zip Code 61453	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self	Occupation Entrepreneur		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) B. John F. Green		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2014	
Mailing Address RR 1 Box 68		Transaction ID : 0015515	
City Little York	State IL	Zip Code 61453	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -400.00	
Name of Employer Self	Occupation Entrepreneur		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

**[MEMO ITEM]
REDESIGNATION**

Full Name (Last, First, Middle Initial) C. John F. Green		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2014	
Mailing Address RR 1 Box 68		Transaction ID : 0015516	
City Little York	State IL	Zip Code 61453	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Self	Occupation Entrepreneur		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

**[MEMO ITEM]
REDESIGNATION**

SUBTOTAL of Receipts This Page (optional).....	500.00
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 12 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
James Barton

Mailing Address 417 W Lawndale

City Peoria State IL Zip Code 61604

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015517

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald Madson

Mailing Address 2448 29th Street

City Moline State IL Zip Code 61265

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015519

Amount of Each Receipt this Period
100.00

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

Mailing Address 2859 Knox Highway 3

City Altona State IL Zip Code 61414

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

Name of Employer Illinois Farm Bureau Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015520

Amount of Each Receipt this Period
2600.00

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

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

2950.00

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

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

FOR LINE NUMBER: PAGE 13 OF 49
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Kevin Schoonmaker

Mailing Address 2012 44th Street

City Moline State IL Zip Code 61265

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

Name of Employer Bank of Orion Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015523

Amount of Each Receipt this Period
 250.00

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

Mailing Address 3000 41st St

City Moline State IL Zip Code 61265

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

Name of Employer Bergren Appraisal Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015527

Amount of Each Receipt this Period
 25.00

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

Mailing Address 702 E 4th St

City Coal Valley State IL Zip Code 61240

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015534

Amount of Each Receipt this Period
 100.00

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

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

375.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 14 OF 49

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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Chet Boruff

Mailing Address 3445 14th Street

City Moline State IL Zip Code 61265

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

Name of Employer Assn of Official Seed Cert Agencies Occupation Chief Executive Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015535

Amount of Each Receipt this Period
 500.00

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

Mailing Address 702 E 4th St

City Coal Valley State IL Zip Code 61240

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015538

Amount of Each Receipt this Period
 25.00

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

Mailing Address 1111 11th St.

City Moline State IL Zip Code 61265

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

Name of Employer Alleman High School Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015546

Amount of Each Receipt this Period
 100.00

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

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Jan Weber

Mailing Address 25802 E 1650 St.

City State Zip Code
Geneseo IL 61254

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

Name of Employer Occupation
State of Illinois Inspector

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015551

Amount of Each Receipt this Period
25.00

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

Mailing Address 1885 65th Ave

City State Zip Code
Aledo IL 61231

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

Name of Employer Occupation
1st Choice Sanatation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015555

Amount of Each Receipt this Period
50.00

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

Mailing Address 106 Lafayette

City State Zip Code
Prophetstown IL 61277

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

Name of Employer Occupation
self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015563

Amount of Each Receipt this Period
250.00

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

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

325.00

**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 16 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Sarah Dickinson

Mailing Address 1 Lakeview Ct

City Galena State IL Zip Code 61036

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

Name of Employer Self Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015568

Amount of Each Receipt this Period
 100.00

Amount of Each Receipt this Period
 350.00

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

Mailing Address 3403 Kilkenny Dr

City Crystal Lake State IL Zip Code 60014

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0015577

Amount of Each Receipt this Period
 50.00

Amount of Each Receipt this Period
 350.00

C. Full Name (Last, First, Middle Initial)
Mr. Pierre Loomis

Mailing Address 1609 East Broadway

City Monmouth State IL Zip Code 61462

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0015594

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 700.00

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

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

400.00

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

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

FOR LINE NUMBER: PAGE 17 OF 49
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Virginia R Wilson

Mailing Address 14 Lighthouse Lane

City State Zip Code
Hampton IL 61256

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

Name of Employer Occupation
retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0015602

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Rod E. Krahl

Mailing Address 13020 US Route 67

City State Zip Code
Milan IL 61264

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

Name of Employer Occupation
Elliott's Pilot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0015609

Amount of Each Receipt this Period
100.00

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

Mailing Address 1105 34th Ave Dr

City State Zip Code
Moline IL 61265

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

Name of Employer Occupation
Midland Info Resources Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0015630

Amount of Each Receipt this Period
500.00

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

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

700.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 18 OF 49

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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Harry C. Stone

Mailing Address 8913 N Galena Rd

City Peoria State IL Zip Code 61615

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0015634

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 750.00

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

Mailing Address 6847 Cintas Blvd

City Mason State OH Zip Code 45040

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

Name of Employer Cintas Corporation Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0015639

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 3338 37th Ave Dr

City Moline State IL Zip Code 61265

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

Name of Employer retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0015640

Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
 500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Walter Stevenson

Mailing Address 4610 Jayden Ct

City State Zip Code
Quincy IL 62305

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0015641

Amount of Each Receipt this Period
2000.00

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

Mailing Address 2431 28th St

City State Zip Code
Moline IL 61265

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0015650

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Andrew Jones

Mailing Address 3743 40th St Pl

City State Zip Code
Moline IL 61265

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
575.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0015651

Amount of Each Receipt this Period
25.00

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

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

2525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Brenda Boyd

Mailing Address 1 Wildwood Dr

City Moline State IL Zip Code 61265

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : 0015656

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Gene Griffith

Mailing Address 15530 E 1600 St

City Geneseo State IL Zip Code 61254

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

Name of Employer Liberty Fuels Occupation Supervisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 25 / 2014

Transaction ID : 0015670

Amount of Each Receipt this Period
500.00

GENERAL/UNCODED

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

Mailing Address 7 Eagle Pointe Pass

City Rapids City State IL Zip Code 61278

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

Name of Employer Fontaine Consulting Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 25 / 2014

Transaction ID : 0015673

Amount of Each Receipt this Period
500.00

GENERAL/UNCODED

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Beverly Perlson

Mailing Address 3615 Blue Ridge Ct.

City Aurora State IL Zip Code 60504

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : 0015676

Amount of Each Receipt this Period
100.00

GENERAL/UNCODED

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

Mailing Address 788 25th Ave Ct

City Moline State IL Zip Code 61265

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : 0015697

Amount of Each Receipt this Period
500.00

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

Mailing Address 404 E. Ogden Ave

City Geneseo State IL Zip Code 61254

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : 0015714

Amount of Each Receipt this Period
250.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 49
	<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)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. Stephen Deporter		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 5408 162nd Ave		Transaction ID : 0015742
City Milan	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Genesis/Trinity Hospitals	Occupation Nurse Practitioner	
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. Kelly Woitel		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 619 N. Russel Ave		Transaction ID : 0015762
City Geneseo	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Homemaker	Occupation Homemaker	
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) C. Agnieszka Berk		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2014
Mailing Address 1531 25th St		Transaction ID : 0015771
City Bettendorf	State IA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL 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 23 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Barry Snodgrass

Mailing Address 8038 N 1935 Ave

City State Zip Code
Geneseo IL 61254

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

Name of Employer Occupation
Becker and Becker, Inc President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2014

Transaction ID : 0015774

Amount of Each Receipt this Period
250.00

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

Mailing Address 6814 106th Ave

City State Zip Code
Milan IL 61264

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

Name of Employer Occupation
CountryStore, Inc Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2014

Transaction ID : 0015779

Amount of Each Receipt this Period
2000.00

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

Mailing Address 8004 47th St.

City State Zip Code
Milan IL 61264

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2014

Transaction ID : 0015801

Amount of Each Receipt this Period
500.00

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

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

2750.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 24 OF 49

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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Penny Hutchison

Mailing Address 16249 E. 350th St

City Orion State IL Zip Code 61273

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : 0015803

Amount of Each Receipt this Period
 1000.00

1100.00

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

Mailing Address 8038 N 1935 Ave

City Geneseo State IL Zip Code 61254

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

Name of Employer Becker and Becker, Inc Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : 0015810

Amount of Each Receipt this Period
 50.00

550.00

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

Mailing Address 4205 14th St.

City Rock Island State IL Zip Code 61201

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : 0015831

Amount of Each Receipt this Period
 200.00

2850.00

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

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

1250.00

**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 25 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Shawn Anderson

Mailing Address 400 East South St.

City State Zip Code
Geneseo IL 61254

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

Name of Employer Occupation
Network Business Systems Information Technology

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : 0015838

Amount of Each Receipt this Period
100.00

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

Mailing Address 3615 Blue Ridge Ct.

City State Zip Code
Aurora IL 60504

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0015847

Amount of Each Receipt this Period
100.00

GENERAL/UNCODED

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

Mailing Address 8382 N. Craft Rd.

City State Zip Code
Vermont IL 61484

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0015854

Amount of Each Receipt this Period
250.00

GENERAL/UNCODED

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

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

450.00

**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 26 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Michael Carson

Mailing Address 1020 34th Avenue Drive

City Moline State IL Zip Code 61265

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

Name of Employer Heavy Company Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0015859

Amount of Each Receipt this Period
500.00

GENERAL/UNCODED

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

Mailing Address 116 South Side Dr

City Geneseo State IL Zip Code 61254

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0015872

Amount of Each Receipt this Period
250.00

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

Mailing Address 101 Lost Lane

City Savanna State IL Zip Code 61074

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0015880

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 27 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Michael Frye

Mailing Address 904 SW 10th St.

City Aledo State IL Zip Code 61231

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

Name of Employer: Frye Builders & Associates Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0015881

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 18014 91st St. W

City Reynolds State IL Zip Code 61279

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0015882

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 18014 91st St. W

City Reynolds State IL Zip Code 61279

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0015883

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 28 OF 49
	<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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Lynn Schwigen

Mailing Address 2610 128th Ave Ct W

City Milan State IL Zip Code 61264

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0015887

Amount of Each Receipt this Period
 250.00

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

Mailing Address 2018 Deerwood Lane

City Port Byron State IL Zip Code 61275

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0015888

Amount of Each Receipt this Period
 250.00

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).....

500.00

39075.98

**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 29 OF 49
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Duncan D. Hunter for Congress

Mailing Address 9340 Fuerte Dr Ste 302

City La Mesa State CA Zip Code 91941

FEC ID number of contributing federal political committee. **C** C00126961

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
 03 / 10 / 2014

Transaction ID : 0015489

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

1000.00

**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 30 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

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

Mailing Address P.O. Box 65314

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00328468**

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
 03 / 05 / 2014

Transaction ID : 0015475

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
Jobs, Economy and Budget Fund

Mailing Address 7315 Wisconsin Ave, Suite 310 East

City Bethesda State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C C00420695**

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
 03 / 05 / 2014

Transaction ID : 0015476

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 600 14th St NW, Ste 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00236489**

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
 03 / 10 / 2014

Transaction ID : 0015491

Amount of Each Receipt this Period
 1000.00

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 31 OF 49
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
21st Century PAC

Mailing Address 2052 Lake Audubon Court

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C C00315747**

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
 03 / 10 / 2014

Transaction ID : 0015495

Amount of Each Receipt this Period
 1000.00

2000.00

B. Full Name (Last, First, Middle Initial)
Kinzinger For Congress

Mailing Address P.O. Box 487

City New Lenox State IL Zip Code 60451

FEC ID number of contributing federal political committee. **C C00458877**

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
 03 / 10 / 2014

Transaction ID : 0015496

Amount of Each Receipt this Period
 2000.00

2000.00

C. Full Name (Last, First, Middle Initial)
National Federation of Independent Business Safe Trust

Mailing Address 1201 F Street, NW Suite 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00101105**

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
 03 / 16 / 2014

Transaction ID : 0015521

Amount of Each Receipt this Period
 4606.20

5000.00

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

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

7606.20

**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 32 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

A. Caterpillar Employees Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 N.E. Adams Street
 City Peoria State IL Zip Code 61629
 FEC ID number of contributing federal political committee. **C** C00148031
 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 Y Y
 03 / 16 / 2014
Transaction ID : 0015524
 Amount of Each Receipt this Period
 2500.00

B. The Freedom Project
 Full Name (Last, First, Middle Initial)
 Mailing Address 631-B Pennsylvania Avenue, SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C** C00305805
 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 Y Y
 03 / 16 / 2014
Transaction ID : 0015525
 Amount of Each Receipt this Period
 5000.00

C. Friends of John Boehner
 Full Name (Last, First, Middle Initial)
 Mailing Address 7908 Cincinnati Dayton Road Suite I-2
 City West Chester State OH Zip Code 45069
 FEC ID number of contributing federal political committee. **C** C00237198
 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
 03 / 16 / 2014
Transaction ID : 0015526
 Amount of Each Receipt this Period
 2000.00

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

9500.00

**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 33 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial)
Eye of The Tiger PAC

Mailing Address P.O. Box 2485

City Springfield State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C** C00467431

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
 03 / 17 / 2014

Transaction ID : 0015613

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
White Castle PAC

Mailing Address 555 W. Goodale St

City Columbus State OH Zip Code 43215

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
 03 / 17 / 2014

Transaction ID : 0015614

Amount of Each Receipt this Period
 500.00

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

Mailing Address 600 14th St NW, Ste 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

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
 03 / 17 / 2014

Transaction ID : 0015615

Amount of Each Receipt this Period
 1500.00

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 34 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

A. Citizens For Moffitt

Full Name (Last, First, Middle Initial)
Citizens For Moffitt

Mailing Address 1006 Knox Highway 17

City State Zip Code
Gilson IL 61436

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
 03 / 29 / 2014

Transaction ID : 0015784

Amount of Each Receipt this Period
 50.00

B. Diane PAC

Full Name (Last, First, Middle Initial)
Diane PAC

Mailing Address 819 Plantation Blvd

City State Zip Code
Gallatin TN 37066

FEC ID number of contributing federal political committee. **C** C00499996

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
 03 / 29 / 2014

Transaction ID : 0015836

Amount of Each Receipt this Period
 1000.00

C. New Pioneers PAC

Full Name (Last, First, Middle Initial)
New Pioneers PAC

Mailing Address 228 S. Washington St. Suite 115

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00459123

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
 03 / 29 / 2014

Transaction ID : 0015837

Amount of Each Receipt this Period
 2000.00

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

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

3050.00

31656.20

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. Kevin Hogan		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 10715 Turkey Hollow Road		Amount of Each Disbursement this Period 2500.00 Transaction ID : 0015659-IK
City State Zip Code Taylor Ridge IL 61284	Purpose of Disbursement IN-KIND: Computer Equipment Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	(contributor) In-Kind Received

Full Name (Last, First, Middle Initial) B. Jon Schweppe		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 24209 Hillcrest Drive		Amount of Each Disbursement this Period 1873.44 Transaction ID : 0015470
City State Zip Code Sterling IL 61081	Purpose of Disbursement Payroll Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Travis Sterling		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2014
Mailing Address 1493 Legacy Drive Unit #2		Amount of Each Disbursement this Period 164.88 Transaction ID : 0015579
City State Zip Code Dekalb IL 60115	Purpose of Disbursement Travel Expense Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	4538.32
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 36 OF 49		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. Paypal Co.		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 2211 North First Street		Amount of Each Disbursement this Period 60.00 Transaction ID : 0015483
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement Credit Card Terminal Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Jim Bowman		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 1002 17th Ave		Amount of Each Disbursement this Period 6666.00 Transaction ID : 0015578
City Moline	State IL	
Zip Code 61265	Purpose of Disbursement Campaign Consulting Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Mr. Adrian Madunic		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 3707 John Deere Rd		Amount of Each Disbursement this Period 245.00 Transaction ID : 0015580
City East Moline	State IL	
Zip Code 61244	Purpose of Disbursement Postage Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6971.00
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 37 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. The Carlyle Gregory Co.			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 140 Little Falls St. #104			Amount of Each Disbursement this Period 3643.94 Transaction ID : 0015584
City Falls Church	State VA	Zip Code 22046	
Purpose of Disbursement Campaign Consulting Expense		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Chase Credit Card			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address PO Box 15153			Amount of Each Disbursement this Period 1793.89 Transaction ID : 0015583
City Wilmington	State DE	Zip Code 19886	
Purpose of Disbursement Credit Card Payment		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

ITEMIZATION BELOW

Full Name (Last, First, Middle Initial) c. Shell Oil Company			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 910 Louisiana St. One Shell Plaza			Amount of Each Disbursement this Period 354.12 Transaction ID : 0015583-0001
City Houston	State TX	Zip Code 77252	
Purpose of Disbursement Travel Expense		Candidate Name	Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

[MEMO ITEM]
MEMO

SUBTOTAL of Disbursements This Page (optional).....	5437.83
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 39 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. Amoco Gas		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 200 East Randolph St.		Amount of Each Disbursement this Period 166.44
City Chicago	State IL Zip Code 60601	
Purpose of Disbursement Travel Expense	Category/Type 002	Transaction ID : 0015583-0005
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. Casey's General Store		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 306 2nd Ave		Amount of Each Disbursement this Period 248.74
City Carbon Cliff	State IL Zip Code 61239	
Purpose of Disbursement Travel Expense	Category/Type 002	Transaction ID : 0015583-0007
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO
State: District:		

Full Name (Last, First, Middle Initial) c. Holiday Inn		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 201 S. 3rd Street		Amount of Each Disbursement this Period 117.31
City Quincy	State IL Zip Code 62301	
Purpose of Disbursement Travel Expense	Category/Type 002	Transaction ID : 0015583-0011
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 40 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. Chase Credit Card		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address PO Box 15153		Amount of Each Disbursement this Period 5.92
City Wilmington	State DE	
Zip Code 19886	Purpose of Disbursement Bank Expense	Transaction ID : 0015583-0012
Candidate Name	001 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)	[MEMO ITEM] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. Constant Contact		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 1601 Trapelo Rd		Amount of Each Disbursement this Period 100.94
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Computer Software	Transaction ID : 0015583-0014
Candidate Name	001 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)	[MEMO ITEM] MEMO
State: District:		

Full Name (Last, First, Middle Initial) c. BP Gas, Llc		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 3718 39th Ave Dr		Amount of Each Disbursement this Period 121.13
City Moline	State IL	
Zip Code 61265	Purpose of Disbursement Travel Expense	Transaction ID : 0015583-0015
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 41 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. Sprint		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 913 41st Avenue Dr		Amount of Each Disbursement this Period 2991.78
City Moline State IL Zip Code 61265	Purpose of Disbursement Phone Bill Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : 0015583-0016 [MEMO ITEM] MEMO

Full Name (Last, First, Middle Initial) B. Mr. Mitchell Heckenkamp		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 847 32nd Ave		Amount of Each Disbursement this Period 71.28
City Moline State IL Zip Code 61265	Purpose of Disbursement Food for Fundraiser Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : 0015582

Full Name (Last, First, Middle Initial) c. Giovanni's		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 610 N . Bell School Rd		Amount of Each Disbursement this Period 2919.78
City Rockford State IL Zip Code 61107	Purpose of Disbursement Food for Fundraiser Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : 0015587

SUBTOTAL of Disbursements This Page (optional).....	2991.06
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 42 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial)
A. Catalyst Group

Mailing Address 1115 Massachusetts Ave NW

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 11 / 2014

Amount of Each Disbursement this Period: 1500.00

Transaction ID : 0015586

Category/Type: 003

Full Name (Last, First, Middle Initial)
B. Mr. Adrian Madunic

Mailing Address 3707 John Deere Rd

City East Moline State IL Zip Code 61244

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 11 / 2014

Amount of Each Disbursement this Period: 545.00

Transaction ID : 0015581

Category/Type: 001

Full Name (Last, First, Middle Initial)
c. Office Machine Consultants

Mailing Address 3624 Blackhawk Road

City Rock Island State IL Zip Code 61201

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 11 / 2014

Amount of Each Disbursement this Period: 56.98

Transaction ID : 0015585

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 2101.98

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 43 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 514 17th St		Amount of Each Disbursement this Period 811.10 Transaction ID : 0015686
City Moline State IL Zip Code 61265	Purpose of Disbursement Postage Expense Candidate Name Category/Type 001	
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. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 514 17th St		Amount of Each Disbursement this Period 340.00 Transaction ID : 0015839
City Moline State IL Zip Code 61265	Purpose of Disbursement Postage Expense Candidate Name Category/Type 001	
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) c. Office Machine Consultants		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 3624 Blackhawk Road		Amount of Each Disbursement this Period 105.00 Transaction ID : 0015842
City Rock Island State IL Zip Code 61201	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1256.10
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 44 OF 49		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. Mediacom		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address P.O. Box 5744		Amount of Each Disbursement this Period 144.62 Transaction ID : 0015841
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Phone Bill	Category/ Type 001
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. Rock Island County Republicans		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 1721 5th Avenue		Amount of Each Disbursement this Period 250.00 Transaction ID : 0015845
City Moline	State IL	
Zip Code 61265	Purpose of Disbursement Advertisement Expense	Category/ Type 004
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) C. Mr. Adrian Madunic		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 3707 John Deere Rd		Amount of Each Disbursement this Period 104.37 Transaction ID : 0015843
City East Moline	State IL	
Zip Code 61244	Purpose of Disbursement Fundraising Supplies	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	498.99
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 45 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. Mr. Adrian Madunic		Date of Disbursement MM / DD / YYYY 03 / 25 / 2014
Mailing Address 3707 John Deere Rd		Amount of Each Disbursement this Period 2,000.00 Transaction ID : 0015844
City East Moline	State IL	
Zip Code 61244	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Paypal Co.		Date of Disbursement MM / DD / YYYY 03 / 25 / 2014
Mailing Address 2211 North First Street		Amount of Each Disbursement this Period 86.02 Transaction ID : 0015685
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement Credit Card Processing Fee	Category/ Type 001
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) c. Lavender Crest Winery		Date of Disbursement MM / DD / YYYY 03 / 28 / 2014
Mailing Address 5401 US Hwy 6		Amount of Each Disbursement this Period 2168.04 Transaction ID : 0015840
City Colona	State IL	
Zip Code 61241	Purpose of Disbursement Food for Fundraiser	Category/ Type 003
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:	

SUBTOTAL of Disbursements This Page (optional).....	2354.06
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 46 OF 49		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
Bobby Schilling for Congress

Full Name (Last, First, Middle Initial) A. Jon Schweppe		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 24209 Hillcrest Drive		Amount of Each Disbursement this Period 1873.44 Transaction ID : 0015846
City Sterling	State IL	
Zip Code 61081	Purpose of Disbursement Payroll Expense	Category/ Type 001
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	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Paypal Co.		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 2211 North First Street		Amount of Each Disbursement this Period 61.22 Transaction ID : 0015867
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement Credit Card Processing Fee	Category/ Type 001
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	
State: District:	Other (specify)	

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	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	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1934.66
TOTAL This Period (last page this line number only).....	28084.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
(check only one)

9
 10

NAME OF COMMITTEE (In Full)

Bobby Schilling for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Consolidated Capital and Consulting

Mailing Address P.O. Box 234

City State Zip Code
Columbia MO 65205

Nature of Debt (Purpose):
Professional/Consulting Services

Outstanding Balance Beginning This Period **Transaction ID : 6110-**
10000.00

Amount Incurred This Period 0.00 Payment This Period 0.00 Outstanding Balance at Close of This Period 10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	▶	10000.00
2) TOTALS This Period (last page this line number only)	▶	10000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		10000.00

FEC FORM 3Z (File with Form 3)
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS
 (To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) Bobby Schilling for Congress		Report Covering Period: From: <table style="display: inline-table; border: 1px solid black; text-align: center;"><tr><td>M</td><td>M</td></tr><tr><td>02</td><td></td></tr></table> / <table style="display: inline-table; border: 1px solid black; text-align: center;"><tr><td>D</td><td>D</td></tr><tr><td>27</td><td></td></tr></table> / <table style="display: inline-table; border: 1px solid black; text-align: center;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2014</td><td></td><td></td><td></td><td></td></tr></table> To: <table style="display: inline-table; border: 1px solid black; text-align: center;"><tr><td>M</td><td>M</td></tr><tr><td>03</td><td></td></tr></table> / <table style="display: inline-table; border: 1px solid black; text-align: center;"><tr><td>D</td><td>D</td></tr><tr><td>31</td><td></td></tr></table> / <table style="display: inline-table; border: 1px solid black; text-align: center;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2014</td><td></td><td></td><td></td><td></td></tr></table>				M	M	02		D	D	27		Y	Y	Y	Y	Y	2014					M	M	03		D	D	31		Y	Y	Y	Y	Y	2014				
M	M																																								
02																																									
D	D																																								
27																																									
Y	Y	Y	Y	Y																																					
2014																																									
M	M																																								
03																																									
D	D																																								
31																																									
Y	Y	Y	Y	Y																																					
2014																																									
Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees			(b) Line No. 11(b) Total Contributions From Political Party Committees																																				
A	Bobby Schilling for Congress	57691.95			1000.00																																				
B	Freshman Hold'em JFC Column Total Last Page Only.....	0.00			0.00																																				
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans																																			
A	31656.20	0.00	90348.15	0.00	0.00	0.00																																			
B	0.00	0.00	0.00	0.00	0.00	0.00																																			
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees																																			
A	0.00	0.00	0.00	90348.15	28084.00	0.00																																			
B	0.00	0.00	0.00	0.00	0.00	0.00																																			
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees																																			
A	0.00	0.00	0.00	0.00	0.00	0.00																																			
B	0.00	0.00	0.00	0.00	0.00	0.00																																			
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee																																			
A	0.00	0.00	28084.00	269851.83	332115.98	0.00																																			
B	0.00	0.00	0.00	0.00	0.00	0.00																																			
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures																																						
A	10000.00	90348.15	28084.00																																						
B	0.00	0.00	0.00																																						

FEC FORM 3Z (File with Form 3)
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS
 (To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) Bobby Schilling for Congress	Report Covering Period: From: M M / D D / Y Y Y Y 02 / 27 / 2014
	To: M M / D D / Y Y Y Y 03 / 31 / 2014

Committee Name	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A Bobby Schilling for Congress		
B Column Total Last Page Only.....	57691.95	1000.00

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A						
B	31656.20	0.00	90348.15	0.00	0.00	0.00
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A						
B	0.00	0.00	0.00	90348.15	28084.00	0.00
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A						
B	0.00	0.00	0.00	0.00	0.00	0.00
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A						
B	0.00	0.00	28084.00	269851.83	332115.98	0.00
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A						
B	10000.00	90348.15	28084.00			