

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day **POST-Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Michael Kasper

Signature of Treasurer Michael Kasper [Electronically Filed] Date  /  /

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**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**DEMOCRATIC PARTY OF ILLINOIS**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		580158.12
(b) Cash on Hand at Beginning of Reporting Period.....	705315.64	
(c) Total Receipts (from Line 19) .....	92156.99	712581.13
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	797472.63	1292739.25
7. Total Disbursements (from Line 31).....	34004.98	529271.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	763467.65	763467.65
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**DEMOCRATIC PARTY OF ILLINOIS**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	36700.00	178150.00
(ii) Unitemized .....	0.00	9596.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	36700.00	187746.00
(b) Political Party Committees .....	0.00	5014.86
(c) Other Political Committees (such as PACs).....	25000.00	166219.42
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	61700.00	358980.28
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	25608.55
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	30456.99	327992.30
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	30456.99	327992.30
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	92156.99	712581.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	61700.00	384588.83

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	4759.34	89014.25
(ii) Non-Federal Share.....	17904.27	334171.75
(b) Other Federal Operating Expenditures .....	0.00	15644.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	22663.61	438830.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	8300.00	84100.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	3041.37	6341.54
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	3041.37	6341.54
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34004.98	529271.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16100.71	195099.85

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	61700.00	358980.28
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	61700.00	358980.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4759.34	104658.31
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	25608.55
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4759.34	79049.76

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. Jorge Acevedo**  
Full Name (Last, First, Middle Initial)

Mailing Address 104 Hunts Bluff Rd

City Sparks State MD Zip Code 21152

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

Name of Employer Exelon Occupation VP Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2013  
**Transaction ID : SA11AI.33889**

Amount of Each Receipt this Period  
 500.00

**B. Jim D. Bailey**  
Full Name (Last, First, Middle Initial)

Mailing Address 405 Lakewood Avenue

City Danville State IL Zip Code 61832

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

Name of Employer International Brotherhood of Elect. Occupation Business Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2013  
**Transaction ID : SA11AI.33947**

Amount of Each Receipt this Period  
 250.00

**C. Amy Best**  
Full Name (Last, First, Middle Initial)

Mailing Address 4336 Western Avenue

City Western Springs State IL Zip Code 60558

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

Name of Employer Exelon Occupation HR vice president

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 10 / 2013  
**Transaction ID : SA11AI.33945**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial) <b>A. George R. Black</b>			Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2013 <b>Transaction ID : SA11AI.33956</b>
Mailing Address 320 George Street			Amount of Each Receipt this Period 1000.00
City Morris	State IL	Zip Code 60450-1144	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Douglas Brown</b>			Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2013 <b>Transaction ID : SA11AI.33935</b>
Mailing Address 419 N. Madison			Amount of Each Receipt this Period 1000.00
City Hinsdale	State IL	Zip Code 60521	
FEC ID number of contributing federal political committee. C			
Name of Employer Exelon		Occupation Chief Investment Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Edward Burke</b>			Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2013 <b>Transaction ID : SA11AI.33944</b>
Mailing Address 3 1st National Plaza			Amount of Each Receipt this Period 7800.00
City Chicago	State IL	Zip Code 60602	
FEC ID number of contributing federal political committee. C			
Name of Employer Burke, Burns, Pinelli, Ltd.		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 7800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial) <b>A. Kyle B. Crowley</b>		Date of Receipt 12 / 13 / 2013 <b>Transaction ID : SA11AI.33948</b>
Mailing Address 5350 N. Lawler Avenue		Amount of Each Receipt this Period 1500.00
City Chicago	State IL Zip Code 60630	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 1500.00
Name of Employer Exelon Corp.	Occupation Senior VP Chief Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Joseph Dominquez</b>		Date of Receipt 12 / 27 / 2013 <b>Transaction ID : SA11AI.33957</b>
Mailing Address 102 Richardson Brook Drive		Amount of Each Receipt this Period 1500.00
City Kennett Square	State PA Zip Code 19348	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 1500.00
Name of Employer Exelon	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Laura Plumb Duda</b>		Date of Receipt 12 / 27 / 2013 <b>Transaction ID : SA11AI.33958</b>
Mailing Address 5513 N. Bernard		Amount of Each Receipt this Period 500.00
City Chicago	State IL Zip Code 60625	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 500.00
Name of Employer Exelon	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 31  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)  
**A. Daniel Enright**

Mailing Address 2734 E 1959th rd

City Ottawa	State IL	Zip Code 61350
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FEC ID number of contributing federal political committee. **C**

Name of Employer Exelon	Occupation SVP Operations
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2013

**Transaction ID : SA11AI.33936**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 550 N. Kingsbury

City Chicago	State IL	Zip Code 60654
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FEC ID number of contributing federal political committee. **C**

Name of Employer Exelon	Occupation VP
----------------------------	------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2013

**Transaction ID : SA11AI.33937**

Amount of Each Receipt this Period  
1500.00

Full Name (Last, First, Middle Initial)  
**C. Frank Goetz**

Mailing Address 1718 Mt. Carmel Road

City Parkton	State MD	Zip Code 21120
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FEC ID number of contributing federal political committee. **C**

Name of Employer Exelon	Occupation Vice President
----------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	10	/	2013

**Transaction ID : SA11AI.33946**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. Christopher Gould**  
Full Name (Last, First, Middle Initial)

Mailing Address 2042 Washington Avenue

City Wilmette State IL Zip Code 60091

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

Name of Employer Exelon Occupation Senior vice president

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2013

**Transaction ID : SA11AI.33962**

Amount of Each Receipt this Period  
 500.00

**B. Bryan Hanson**  
Full Name (Last, First, Middle Initial)

Mailing Address 506 W. Jefferson Avenue

City Naperville State IL Zip Code 60540

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

Name of Employer Exelon Occupation VP Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : SA11AI.33938**

Amount of Each Receipt this Period  
 1000.00

**C. Mark Huston**  
Full Name (Last, First, Middle Initial)

Mailing Address 4450 Stoncrest Drive

City Ellicott City State MD Zip Code 21043

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

Name of Employer Constellation Occupation Senior vice president

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : SA11AI.33939**

Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A. Thomas Hynes**  
Full Name (Last, First, Middle Initial)

Mailing Address 21 E. Huron Street  
Unit 1603

City Chicago State IL Zip Code 60611

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

Name of Employer Com Ed Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
12 / 30 / 2013  
**Transaction ID : SA11AI.33963**

Amount of Each Receipt this Period  
1000.00

**B. Maria Kuriakos**  
Full Name (Last, First, Middle Initial)

Mailing Address 6240 N. Lundy

City Chicago State IL Zip Code 60646

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

Name of Employer Self Employed Occupation Self Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
12 / 30 / 2013  
**Transaction ID : SA11AI.33967**

Amount of Each Receipt this Period  
150.00

**C. Patrick Laffey**  
Full Name (Last, First, Middle Initial)

Mailing Address 98 San Jainto Blvd  
Unit FSR 1308

City Austin State TX Zip Code 78701

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

Name of Employer JLM Health Care Partners Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1700.00

Date of Receipt  
12 / 09 / 2013  
**Transaction ID : SA11AI.33942**

Amount of Each Receipt this Period  
1700.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial) <b>A. Patrick Laffey</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2013 <b>Transaction ID : SA11AI.33943</b>
Mailing Address 98 San Jainto Blvd Unit FSR 1308		Amount of Each Receipt this Period 2300.00
City Austin State TX Zip Code 78701	FEC ID number of contributing federal political committee. C	
Name of Employer JLM Health Care Partners Occupation President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00

Full Name (Last, First, Middle Initial) <b>B. Craig Nesbit</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2013 <b>Transaction ID : SA11AI.33940</b>
Mailing Address 4300 Winfield Road		Amount of Each Receipt this Period 500.00
City Warrenville State IL Zip Code 60555	FEC ID number of contributing federal political committee. C	
Name of Employer Exelon Occupation VP Communications	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

Full Name (Last, First, Middle Initial) <b>C. Anne Pramaggiore</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2013 <b>Transaction ID : SA11AI.33953</b>
Mailing Address 89 Hills & Dales Road		Amount of Each Receipt this Period 5000.00
City Barrington Hills State IL Zip Code 60010	FEC ID number of contributing federal political committee. C	
Name of Employer Com Ed Occupation Executive	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)  
**A. Martin Proctor**

Mailing Address 100 Constellation Way

City Baltimore State MD Zip Code 21201

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

Name of Employer Exelon Corporation Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 27 / 2013**

**Transaction ID : SA11AI.33961**

Amount of Each Receipt this Period  
**1000.00**

Full Name (Last, First, Middle Initial)  
**B. Mary Streett**

Mailing Address 1447 Florida Ave NW

City Washington State DC Zip Code 20009

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

Name of Employer Exelon Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 09 / 2013**

**Transaction ID : SA11AI.33941**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**C. Jonathan Thayer**

Mailing Address 115 Tunbridge Road

City Baltimore State MD Zip Code 21212

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

Name of Employer Exelon Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 17 / 2013**

**Transaction ID : SA11AI.33954**

Amount of Each Receipt this Period  
**2500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>36700.00</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial) <b>A. EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELON PAC)</b>		Date of Receipt
Mailing Address 101 CONSTITUTION AVENUE NW SUITE 400 EAST		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City WASHINGTON	State DC	Zip Code 20001
FEC ID number of contributing federal political committee.	<input type="text" value="C00141218"/>	<b>Transaction ID : SA11C.33959</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. IBEW PAC VOLUNTARY FUND</b>		Date of Receipt
Mailing Address 900 Seventh Street N.W.		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11C.33965</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
	<input type="text" value="7500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. IBEW PAC VOLUNTARY FUND</b>		Date of Receipt
Mailing Address 900 Seventh Street N.W.		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11C.33966</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
	<input type="text" value="10000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="10000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ELEVATOR CONSTRUCTORS PAC/ INTNL UNION OF ELEVATOR CONSTRUCTORS (NEC PAC)

Mailing Address 7154 COLUMBIA GATEWAY DRIVE

City COLUMBIA	State MD	Zip Code 21046
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00383950

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

**Transaction ID : SA11C.33960**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
UNITED TRANSPORTATION UNION POLITICAL ACTION COMMITTEE (UTU PAC)

Mailing Address 14600 Detroit Ave

City Cleveland	State OH	Zip Code 44107
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2013

**Transaction ID : SA11C.33955**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
UTILITY WORKERS UNION OF AMERICA COPE

Mailing Address 815 16TH ST. NW

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00040741

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

**Transaction ID : SA11C.33950**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	25000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC PARTY OF ILLINOIS**

Mailing Address P.O. BOX 518

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement  
Transfer for check 10309 from prior notice

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.33922**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. DEMOCRATIC PARTY OF ILLINOIS**

Mailing Address P.O. BOX 518

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement  
Transfer for Locomotive Engineer from prior notice

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.33972**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. DEMOCRATIC PARTY OF ILLINOIS**

Mailing Address P.O. BOX 518

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement  
Transfer for Eli Lilly from prior notice

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB29.33973**

Amount of Each Disbursement this Period

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

### A. DEMOCRATIC PARTY OF ILLINOIS

Mailing Address P.O. BOX 518

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement  
Transfer for check IBEW from prior notice

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2013

Transaction ID : SB29.33933

Amount of Each Disbursement this Period

5,000.00
----------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

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

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

5000.00
---------

8300.00
---------

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**DEMOCRATIC PARTY OF ILLINOIS**

Full Name (Last, First, Middle Initial)

**A. Illinois State Board of Elections**

Mailing Address 2329 S. MacArthur

City Springfield State IL Zip Code 62704

Purpose of Disbursement  
Voter file

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 07 / 2013

**Transaction ID : SB30B.33909**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City Springfield State IL Zip Code 62711

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 10 / 2013

**Transaction ID : SB30B.33906**

Amount of Each Disbursement this Period

1270.68

Full Name (Last, First, Middle Initial)

**C. Kenneth Kimber**

Mailing Address 2217 Boysenberry Lane

City Springfield State IL Zip Code 62711

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 20 / 2013

**Transaction ID : SB30B.33925**

Amount of Each Disbursement this Period

1270.69

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

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

3041.37

3041.37

**SCHEDULE H2 (FEC Form 3X)**

**ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)  
DEMOCRATIC PARTY OF ILLINOIS

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<p>ACTIVITY OR EVENT IDENTIFIER 11-18-14 Event (ComEd) (11/18/2014)</p> <p>ACTIVITY IS:  <input checked="" type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input checked="" type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p> <p style="text-align: center;"><b>Transaction ID : H2.33921</b></p>	<p style="text-align: center;">FEDERAL %</p> <p style="text-align: center;">21.00 %</p>	<p style="text-align: center;">NONFEDERAL %</p> <p style="text-align: center;">79.00 %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	<p style="text-align: center;">FEDERAL %</p> <p style="text-align: center;">%</p>	<p style="text-align: center;">NONFEDERAL %</p> <p style="text-align: center;">%</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	<p style="text-align: center;">FEDERAL %</p> <p style="text-align: center;">%</p>	<p style="text-align: center;">NONFEDERAL %</p> <p style="text-align: center;">%</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	<p style="text-align: center;">FEDERAL %</p> <p style="text-align: center;">%</p>	<p style="text-align: center;">NONFEDERAL %</p> <p style="text-align: center;">%</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	<p style="text-align: center;">FEDERAL %</p> <p style="text-align: center;">%</p>	<p style="text-align: center;">NONFEDERAL %</p> <p style="text-align: center;">%</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS:  <input type="checkbox"/> Fundraising    <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:  <input type="checkbox"/> New    <input type="checkbox"/> Revised    <input type="checkbox"/> Same as Previously Reported</p>	<p style="text-align: center;">FEDERAL %</p> <p style="text-align: center;">%</p>	<p style="text-align: center;">NONFEDERAL %</p> <p style="text-align: center;">%</p>

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 DEMOCRATIC PARTY OF ILLINOIS

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
DEMOCRATIC PARTY OF ILLINOIS	MM / DD / YYYY 12 / 17 / 2013	30456.99

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	30456.99
<b>Transaction ID : H3.33968</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	30456.99
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	30456.99

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) <b>Powerplay Properties</b>		Transaction ID : <b>H4.33890</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1201 Veterans Parkway			Allocated Activity or Event Year-To-Date 207150.02	
City Springfield	State IL	Zip Code 62707	Date 12 / 02 / 2013	
Purpose of Disbursement: Rent		Category/ Type	Date 12 / 02 / 2013	
Activity or Event Identifier: Administrative			Date 12 / 02 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	
56.79			213.66	
		=	TOTAL AMOUNT	
			270.45	

B. Full Name (Last, First, Middle Initial) <b>UPS</b>		Transaction ID : <b>H4.33891</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Lockbox 577			Allocated Activity or Event Year-To-Date 207299.07	
City Carol Stream	State IL	Zip Code 60132-0577	Date 12 / 03 / 2013	
Purpose of Disbursement: Shipping		Category/ Type	Date 12 / 03 / 2013	
Activity or Event Identifier: Administrative			Date 12 / 03 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	
31.30			117.75	
		=	TOTAL AMOUNT	
			149.05	

C. Full Name (Last, First, Middle Initial) <b>Clearfire Studios</b>		Transaction ID : <b>H4.33892</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2412 Silvermill Court			Allocated Activity or Event Year-To-Date 207374.07	
City Springfield	State IL	Zip Code 62704	Date 12 / 03 / 2013	
Purpose of Disbursement: Website updates		Category/ Type	Date 12 / 03 / 2013	
Activity or Event Identifier: Administrative			Date 12 / 03 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	
15.75			59.25	
		=	TOTAL AMOUNT	
			75.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.84		390.66		494.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33893</b> <b>Quill Corporation</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 37600		Allocated Activity or Event Year-To-Date _____ 208236.79	
City State Zip Code Philadelphia PA 19101	Date <input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>		
Purpose of Disbursement: Office supplies	<input type="text"/>	Allocated Activity or Event Year-To-Date _____ 208236.79	
Activity or Event Identifier: <b>Administrative</b>		Date <input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="181.17"/>		<input type="text" value="681.55"/>	
		<input type="text" value="862.72"/>	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33894</b> <b>ATT-Carol Stream</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 5080		Allocated Activity or Event Year-To-Date _____ 208850.23	
City State Zip Code Carol Stream IL 60197	Date <input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>		
Purpose of Disbursement: Telephone	<input type="text"/>	Allocated Activity or Event Year-To-Date _____ 208850.23	
Activity or Event Identifier: Administrative		Date <input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="128.82"/>		<input type="text" value="484.62"/>	
		<input type="text" value="613.44"/>	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33899</b> <b>Emily Wurth</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2267 Boysenberry Lane		Allocated Activity or Event Year-To-Date _____ 209660.68	
City State Zip Code Springfield IL 62711	Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>		
Purpose of Disbursement: Insurance reimbursement spends < 25% on FEA	<input type="text"/>	Allocated Activity or Event Year-To-Date _____ 209660.68	
Activity or Event Identifier: Administrative		Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="170.19"/>		<input type="text" value="640.26"/>	
		<input type="text" value="810.45"/>	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="480.18"/>		<input type="text" value="1806.43"/>		<input type="text" value="2286.61"/>

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**DEMOCRATIC PARTY OF ILLINOIS**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.33900</b> <b>ADP</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 842854		Allocated Activity or Event Year-To-Date _____ 209724.98	
City State Zip Code Boston MA 02284	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>	
Purpose of Disbursement: Payroll fee			
Activity or Event Identifier: <b>Administrative</b>			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 13.50 _____ 50.80 _____ 64.30			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.33902</b> <b>Emily Wurth</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2267 Boysenberry Lane		Allocated Activity or Event Year-To-Date _____ 211086.60	
City State Zip Code Springfield IL 62711	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>	
Purpose of Disbursement: Wages spends < 25% on FEA			
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 285.94 _____ 1075.68 _____ 1361.62			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.33903</b> <b>Sarah Nelson</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 655 W. Irving Park Road Apt. 5015		Allocated Activity or Event Year-To-Date _____ 212578.12	
City State Zip Code Chicago IL 60613	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>	
Purpose of Disbursement: Wages spends < 25% on FEA			
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 313.22 _____ 1178.30 _____ 1491.52			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 612.66		_____ 2304.78		_____ 2917.44

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) <b>Sarah Nelson</b>		Transaction ID : <b>H4.33904</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 655 W. Irving Park Road Apt. 5015			Allocated Activity or Event Year-To-Date 212786.12	
City Chicago	State IL	Zip Code 60613	Date 12 / 10 / 2013	
Purpose of Disbursement: Mileage reimbursement		Category/ Type	Date 12 / 10 / 2013	
Activity or Event Identifier: <b>Administrative</b>			Date 12 / 10 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
43.68			164.32	208.00

B. Full Name (Last, First, Middle Initial) <b>Lexis Nexis</b>		Transaction ID : <b>H4.33907</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 2314			Allocated Activity or Event Year-To-Date 213482.12	
City Carol Stream	State IL	Zip Code 60132-2314	Date 12 / 10 / 2013	
Purpose of Disbursement: Utilities		Category/ Type	Date 12 / 10 / 2013	
Activity or Event Identifier: Administrative			Date 12 / 10 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
146.16			549.84	696.00

C. Full Name (Last, First, Middle Initial) <b>Americall Communications</b>		Transaction ID : <b>H4.33911</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Bill payment center			Allocated Activity or Event Year-To-Date 213845.12	
City Springfield	State IL	Zip Code 62704	Date 12 / 10 / 2013	
Purpose of Disbursement: Telephone		Category/ Type	Date 12 / 10 / 2013	
Activity or Event Identifier: Administrative			Date 12 / 10 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
76.23			286.77	363.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
266.07		1000.93		1267.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.33912
ATT-Carol Stream
Mailing Address P.O. Box 5080
City Carol Stream State IL Zip Code 60197
Purpose of Disbursement: Telephone
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 214100.52
Date: 12/10/2013
FEDERAL SHARE: 53.63 NONFEDERAL SHARE: 201.77 TOTAL AMOUNT: 255.40

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.33913
AIG
Mailing Address Bill payment center
City Chicago State IL Zip Code 60618
Purpose of Disbursement: Workers compensation insurance
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 217191.52
Date: 12/10/2013
FEDERAL SHARE: 649.11 NONFEDERAL SHARE: 2441.89 TOTAL AMOUNT: 3091.00

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.33914
Culligan of Decatur
Mailing Address 2767 N. Main Street
City Decatur State IL Zip Code 62526
Purpose of Disbursement: Water
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 217216.70
Date: 12/10/2013
FEDERAL SHARE: 5.29 NONFEDERAL SHARE: 19.89 TOTAL AMOUNT: 25.18

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 708.03, 2663.55, 3371.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Form A: Safeguard Business Systems, Inc. Transaction ID: H4.33915. Allocated Activity or Event: Administrative. Purpose of Disbursement: Checks. Activity or Event Identifier: Administrative. Date: 12/10/2013. Total Amount: 156.98.

Form B: Safeguard Business Systems, Inc. Transaction ID: H4.33916. Allocated Activity or Event: Administrative. Purpose of Disbursement: Checks. Activity or Event Identifier: Administrative. Date: 12/10/2013. Total Amount: 156.99.

Form C: UPS Transaction ID: H4.33917. Allocated Activity or Event: Administrative. Purpose of Disbursement: Shipping. Activity or Event Identifier: Administrative. Date: 12/10/2013. Total Amount: 75.90.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (81.88), NONFEDERAL SHARE (307.99), TOTAL AMOUNT (389.87).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Form A: Internal Revenue Service. Transaction ID: H4.33969. Allocated Activity or Event: Administrative. Date: 12/11/2013. Total Amount: 2163.92.

Form B: Kenneth Kimber. Transaction ID: H4.33918. Allocated Activity or Event: Administrative. Date: 12/15/2013. Total Amount: 59.95.

Form C: UPS. Transaction ID: H4.33923. Allocated Activity or Event: Administrative. Date: 12/17/2013. Total Amount: 13.98.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 469.95, 1767.90, 2237.85.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) <b>ADP</b>		Transaction ID : <b>H4.33924</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 842854			Allocated Activity or Event Year-To-Date 219906.72	
City Boston	State MA	Zip Code 02284	Date 12 / 20 / 2013	
Purpose of Disbursement: Payroll fee		Category/ Type	Date 12 / 20 / 2013	
Activity or Event Identifier: <b>Administrative</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
13.08			49.22	62.30

B. Full Name (Last, First, Middle Initial) <b>Emily Wurth</b>		Transaction ID : <b>H4.33926</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2267 Boysenberry Lane			Allocated Activity or Event Year-To-Date 220038.07	
City Springfield	State IL	Zip Code 62711	Date 12 / 20 / 2013	
Purpose of Disbursement: Wages spends < 25% on FEA		Category/ Type	Date 12 / 20 / 2013	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
27.58			103.77	131.35

C. Full Name (Last, First, Middle Initial) <b>Internal Revenue Service</b>		Transaction ID : <b>H4.33970</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Department of the Treasury			Allocated Activity or Event Year-To-Date 220832.68	
City Kansas City	State MO	Zip Code 64999	Date 12 / 23 / 2013	
Purpose of Disbursement: Payroll taxes		Category/ Type	Date 12 / 23 / 2013	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
166.87			627.74	794.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
207.53		780.73		988.26

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.33927
CWLP
Mailing Address 300 South Seventh Street
City Springfield State IL Zip Code 62757
Purpose of Disbursement: Utilities
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 12/26/2013
FEDERAL SHARE 3.88 NONFEDERAL SHARE 14.61 TOTAL AMOUNT 18.49

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.33928
Comcast Cable
Mailing Address P.O. Box 3001
City Southeastern State PA Zip Code 19398
Purpose of Disbursement: Internet services
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 12/26/2013
FEDERAL SHARE 34.75 NONFEDERAL SHARE 130.73 TOTAL AMOUNT 165.48

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.33929
UPS
Mailing Address Lockbox 577
City Carol Stream State IL Zip Code 60132-0577
Purpose of Disbursement: Shipping
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 12/26/2013
FEDERAL SHARE 7.74 NONFEDERAL SHARE 29.11 TOTAL AMOUNT 36.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 46.37, 174.45, 220.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Form A: Quill Corporation, Transaction ID: H4.33932. Allocated Activity: Administrative. Date: 12/30/2013. Total Amount: 144.59.

Form B: Burnham Center, Transaction ID: H4.33934. Allocated Activity: Administrative. Date: 12/31/2013. Total Amount: 918.27.

Form C: The Chicago Club, Transaction ID: H4.33919. Allocated Activity: Fundraising. Date: 12/15/2013. Total Amount: 7329.69.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1762.43, 6630.12, 8392.55.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 4759.34, 17904.27, 22663.61.