





**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

**Democratic Women of the South Suburbs**

Report Covering the Period: From:

MM/DD/YYYY  
04 / 01 / 2016

To:

MM/DD/YYYY  
06 / 30 / 2016

**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).....

1,471.58

1,471.58

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

647.65

2,404.51

2,119.23

3,876.09

(b) Political Party Committees .....  
(c) Other Political Committees (such as PACs).....  
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

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

13. All Loans Received.....

14. Loan Repayments Received.....

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

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

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

18. Transfers from Non-Federal and Levin Funds

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

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

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

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

2,119.23

3,876.09

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

2,119.23

3,876.09

2025 RELEASE UNDER E.O. 14176

**DETAILED SUMMARY PAGE**  
of Disbursements

**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 .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		1,000.00
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....	4,731.49	8,834.55
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4,731.49	8,834.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

2016-07-14 09:00:00





**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	OF
<input 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 Women of the South Suburbs**

**A.** Full Name (Last, First, Middle Initial)  
**Wilcox, Lori**

Mailing Address  
**552 West 15<sup>th</sup> Street**

City **Chicago Heights** State **Illinois** Zip Code **60411**

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

Name of Employer **City of Chicago Heights** Occupation **City Clerk**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**6,615.8**

Date of Receipt  
**05 / 04 / 2016**

Amount of Each Receipt this Period  
**2,100.00**

Memo Item  
*In Kind Contribution*

**B.** Full Name (Last, First, Middle Initial)  
**Watkins, Tanya**

Mailing Address  
**29 West 141<sup>st</sup> Street**

City **Riverdale** State **Illinois** Zip Code **60827**

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

Name of Employer **Vision Next Business Solutions** Occupation **Graphic Designer**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**3,000.00**

Date of Receipt  
**04 / 16 / 2016**

Amount of Each Receipt this Period  
**3,000.00**

Memo Item  
*In Kind Contribution*

**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)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ **9,615.8**

**TOTAL** This Period (last page this line number only).....▶ **9,615.8**

20160414 10:00AM

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

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

FOR LINE NUMBER:  
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (In Full)

**Democratic Women of the South Suburbs**

Full Name (Last, First, Middle Initial)

**A.**

**Lawson, Star**

Mailing Address

**517 Landau Road**

City

**University Park**

State

**Illinois**

Zip Code

**60484**

Purpose of Disbursement

*Pizza for Lobby Day in Springfield*

Candidate Name

**0.0.2**  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
**06 / 02 / 2016**

Amount of Each Disbursement this Period

**24036**

Memo Item

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

**Martinique Banquet Complex**

Mailing Address

**8200 South Cicero Avenue**

City

**Burbank**

State

**Illinois**

Zip Code

**60459**

Purpose of Disbursement

*DWSS October Event payment*

Candidate Name

**0.0.3**  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
**05 / 10 / 2016**

Amount of Each Disbursement this Period

**100000**

Memo Item

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

**Parker, Tim**

Mailing Address

**P. O. Box 148**

City

**Posen**

State

**Illinois**

Zip Code

**60469**

Purpose of Disbursement

*Golf Outing Flyers*

Candidate Name

**0.0.3**  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
**05 / 02 / 2016**

Amount of Each Disbursement this Period

**20000**

Memo Item

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

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


2016-07-14 PM 00:00:00

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

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NAME OF COMMITTEE (In Full)  
**Democratic Women of the South Suburbs**

**A.** Full Name (Last, First, Middle Initial)  
**A.D.S. Charter Bus Lines**

Mailing Address  
**P. O. Box 125**

City **Chicago Heights** State **Illinois** Zip Code **60412**

Purpose of Disbursement  
*Transportation to Springfield Lobby Day*

Candidate Name **0.0.2** Category/Type

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
MM / DD / YYYY  
**05 / 05 / 2016**

Amount of Each Disbursement this Period  
**1,200.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Homewood Flossmoor Park District**

Mailing Address  
**2000 Western Avenue**

City **Olympia Fields** State **Illinois** Zip Code **60461**

Purpose of Disbursement  
*Iron Oaks Environmental Center Rental*

Candidate Name **0.0.7** Category/Type

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
MM / DD / YYYY  
**04 / 12 / 2016**

Amount of Each Disbursement this Period  
**3,400.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Illinois State Board of Elections**

Mailing Address **2329 S. MacArthur Blvd**

City **Springfield** State **Illinois** Zip Code **62708**

Purpose of Disbursement  
*Late Filing Fee*

Candidate Name **0.0.1** Category/Type

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
MM / DD / YYYY  
**06 / 16 / 2016**

Amount of Each Disbursement this Period  
**4,000.00**

Memo Item

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

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

2016-07-14 09:00:00

**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)

PAGE OF

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

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NAME OF COMMITTEE (In Full)

**Democratic Women of the South Suburbs**

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>Wilcox, Lori</b></p>		<p>Date of Disbursement  <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>05</td> <td>04</td> <td>2016</td> </tr> </table> </p>		MM	DD	YYYY	05	04	2016
MM	DD	YYYY							
05	04	2016							
<p>Mailing Address <b>552 West 141<sup>st</sup> Street</b></p>									
<p>City <b>Chicago Heights</b> State <b>Illinois</b> Zip Code <b>60411</b></p>									
<p>Purpose of Disbursement <i>Payment to A.D.S. Charter Bus Lines</i></p>		<p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>210.00</td> </tr> </table> </p>		210.00					
210.00									
<p>Candidate Name</p>		<p>Category/Type <b>0.02</b></p>							
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>							
<p>State: District:</p>		<p><input type="checkbox"/> Memo Item</p>							
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>Wilcox, Lori</b></p>		<p>Date of Disbursement  <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>05</td> <td>04</td> <td>2016</td> </tr> </table> </p>		MM	DD	YYYY	05	04	2016
MM	DD	YYYY							
05	04	2016							
<p>Mailing Address <b>552 West 141<sup>st</sup> Street</b></p>									
<p>City <b>Chicago Heights</b> State <b>Illinois</b> Zip Code <b>60411</b></p>									
<p>Purpose of Disbursement <i>Payment to Eat Enterprises Springfield Trip</i></p>		<p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>352.50</td> </tr> </table> </p>		352.50					
352.50									
<p>Candidate Name</p>		<p>Category/Type <b>0.02</b></p>							
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>							
<p>State: District:</p>		<p><input type="checkbox"/> Memo Item</p>							
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>Wilcox, Lori</b></p>		<p>Date of Disbursement  <table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>05</td> <td>04</td> <td>2016</td> </tr> </table> </p>		MM	DD	YYYY	05	04	2016
MM	DD	YYYY							
05	04	2016							
<p>Mailing Address <b>552 West 141<sup>st</sup> Street</b></p>									
<p>City <b>Chicago Heights</b> State <b>Illinois</b> Zip Code <b>60411</b></p>									
<p>Purpose of Disbursement <i>Lunches for Springfield Trip</i></p>		<p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>47.35</td> </tr> </table> </p>		47.35					
47.35									
<p>Candidate Name</p>		<p>Category/Type <b>0.02</b></p>							
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>		<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>							
<p>State: District:</p>		<p><input type="checkbox"/> Memo Item</p>							

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

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


2016-07-14 00:00:00

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

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NAME OF COMMITTEE (In Full)  
**Democratic Women of the South Suburbs**

**A.**

Full Name (Last, First, Middle Initial)  
**Wilcox, Lori**

Mailing Address  
**552 West 141<sup>st</sup> Street**

City **Chicago Heights** State **Illinois** Zip Code **60411**

Purpose of Disbursement  
*snacks for students Springfield Lobby Day*

Candidate Name  
*snacks for students Springfield Lobby Day*

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
**05 / 03 / 2016**

Amount of Each Disbursement this Period  
**0.02**

Category/Type  
**51.73**

Memo Item

**B.**

Full Name (Last, First, Middle Initial)  
**Watkins, Tonya**

Mailing Address  
**29 West 141<sup>st</sup> Street**

City **Riverdale** State **Illinois** Zip Code **60827**

Purpose of Disbursement  
*Reason for Golf Outing Tickets Flyers*

Candidate Name  
*Reason for Golf Outing Tickets Flyers*

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement  
**04 / 16 / 2016**

Amount of Each Disbursement this Period  
**0.03**

Category/Type  
**300.00**

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Purpose of Disbursement

Candidate Name

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

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

Memo Item

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

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

**4429.94**

20160414 01:00:00

# PRIORITY ★ MAIL ★ EXPRESS™

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6 JUL 14 PM 1:27

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A CUSTOMS DECLARATION  
LABEL MAY BE REQUIRED.



EP13F July 2013 OD:12.5 X 9.5



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FROM: (PLEASE PRINT)

PHONE: ( ) - -

WALTER H. STOKER  
2100 S. HICKORY ST  
WASHINGTON DC 20042

PAYMENT BY ACCOUNT (if applicable)

**DELIVERY OPTIONS (Customer Use Only)**

SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) does not have the addressee's signature; OR 2) purchases additional insurance; OR 3) purchases COD service; OR 4) purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mailbox or other secure location without attempting to obtain the addressee's signature on delivery.

- Delivery Options**
- No Saturday Delivery (delivered next business day)
  - Sunday/Holiday Delivery (Required (additional fee, where available))
  - 10:30 AM Delivery (Required (additional fee, where available))
- Refer to USPS.com or local Post Office for availability.

TO: (PLEASE PRINT)

PHONE: ( ) - -

ZIP + 4® (U.S. ADDRESSES ONLY)

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WASHINGTON DC 20042

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60422  
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PRIORITY  
★ MAIL ★  
EXPRESS™

**OFFICIAL (POSTAL SERVICE USE ONLY)**

<input checked="" type="checkbox"/> Day	<input type="checkbox"/> 2-Day	<input type="checkbox"/> Military	<input type="checkbox"/> DPO
PO ZIP Code	Scheduled Delivery Date (MM/DD/YY)	Postage	
10492	7-13-16	\$22.95	
Date Accepted (MM/DD/YY)	Scheduled Delivery Time	Insurance Fee	COD Fee
7-12-16	10:30 AM - 3:00 PM	\$	\$
Time Accepted	10:30 AM Delivery Fee	Return Receipt Fee	Live Animal Transport/Load Fee
2:24 PM	\$	\$	\$
Weight lbs. ozs.	Sunday/Holiday Premium Fee	Total Postage & Fees	
2 24 16	\$	\$22.95	
DELIVERY (POSTAL SERVICE USE ONLY)	Accepted/Employee Initials		
Delivery Attempt (MM/DD/YY) Time	Employee Signature		
Delivery Attempt (MM/DD/YY) Time	Employee Signature		
Delivery Attempt (MM/DD/YY) Time	Employee Signature		

LABEL 11-B, SEPTEMBER 2013 PSN 7890-02-000-9998

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7 money back guarantee for U.S. destinations only.

VI NOTICION H7 ONI GOODCONTIONN



UNITED STATES POSTAL SERVICE

Federal Election Commission  
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Date of Receipt  
Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked  
7/12/16

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

PREPARER   
(3/2015)

7/14/16  
DATE PREPARED

NON-CONFIDENTIAL DOCUMENT