

# 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.

To Protect Our Heritage PAC

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

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  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.

Molotsky, Alan, E., ,

Type or Print Name of Treasurer

Signature of Treasurer Molotsky, Alan, E., , [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**To Protect Our Heritage PAC**

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="2018"/>	<input type="text" value="202328.49"/>	<input type="text" value="202328.49"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="199307.78"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="4716.00"/>	<input type="text" value="15111.36"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="204023.78"/>	<input type="text" value="217439.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9365.02"/>	<input type="text" value="22781.09"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="194658.76"/>	<input type="text" value="194658.76"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

Write or Type Committee Name

**To Protect Our Heritage PAC**

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).....	4154.00	13890.00
(ii) Unitemized .....	562.00	1066.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4716.00	14956.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	4716.00	14956.00
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	0.00
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	155.36
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4716.00	15111.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4716.00	15111.36

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3865.02	5281.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3865.02	5281.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5500.00	17500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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 .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9365.02	22781.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9365.02	22781.09

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4716.00	14956.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4716.00	14956.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3865.02	5281.09
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3865.02	5281.09

**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 13
	<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)  
**To Protect Our Heritage PAC**

**A. Broner, Yishai, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2928 W. Estes  
 City Chicago State IL Zip Code 60645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VNA Healthtrends Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 406.00

Date of Receipt 06 / 03 / 2018  
**Transaction ID : SA11AI.8070**  
 Amount of Each Receipt this Period 156.00  
 Memo Item  
 Contribution to our PAC

**B. Hoberman, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4201 Davis Street  
 City Skokie State IL Zip Code 60076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Northwest Suburban Podiatry Occupation (for Individual) Podiatrist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 04 / 2018  
**Transaction ID : SA11AI.8075**  
 Amount of Each Receipt this Period 600.00  
 Memo Item  
 Contribution to our PAC

**C. Jacobson, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3212 Harrison St.  
 City Evanston State IL Zip Code 60201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chicago Jewish Funerals Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 29 / 2018  
**Transaction ID : SA11AI.8064**  
 Amount of Each Receipt this Period 350.00  
 Memo Item  
 Contribution to our PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1106.00
<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 13
	<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	

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)  
**To Protect Our Heritage PAC**

**A. Kupietzky, Jacob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9110 Karlov Ave.  
 City Skokie State IL Zip Code 60076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 06 / 04 / 2018  
**Transaction ID : SA11AI.8074**  
 Amount of Each Receipt this Period 600.00  
 Memo Item  
 Contribution to our PAC

**B. Leon, Bruce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2949 W. Fitch  
 City Chicago State IL Zip Code 60645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Employment services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 04 / 2018  
**Transaction ID : SA11AI.8073**  
 Amount of Each Receipt this Period 600.00  
 Memo Item  
 Contribution to our PAC

**C. Levinson, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3133 Sherwin  
 City Chicago State IL Zip Code 60645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Beezee Consulting Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 636.00

Date of Receipt 06 / 03 / 2018  
**Transaction ID : SA11AI.8069**  
 Amount of Each Receipt this Period 36.00  
 Memo Item  
 Contribution to our PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1236.00
<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 13
	<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	

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)  
**To Protect Our Heritage PAC**

**A. Lichtenstein, Nathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3648 Grove  
 City Skokie State IL Zip Code 60076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Aronberg Goldgehn Davis & Garm Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 756.00

Date of Receipt 06 / 03 / 2018  
**Transaction ID : SA11AI.8071**  
 Amount of Each Receipt this Period 156.00  
 Memo Item  
 Contribution to our PAC

**B. Pollack, Harold, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8913 Samoset  
 City Skokie State IL Zip Code 60076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CLDS Occupation (for Individual) Consulting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 04 / 2018  
**Transaction ID : SA11AI.8078**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Contribution to our PAC

**C. Reitman, Sheldon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6401 N. Knox  
 City Lincolnwood State IL Zip Code 60712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 03 / 2018  
**Transaction ID : SA11AI.8065**  
 Amount of Each Receipt this Period 600.00  
 Memo Item  
 Contribution to our PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1056.00
<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 9 OF 13
	<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
-----------------------------	-----------------------------	-----------------------------

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)  
**To Protect Our Heritage PAC**

**A. Rothke, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7633 N. Arcadia  
 City Morton Grove State IL Zip Code 60053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NeuroBehavior & Rehab Network Occupation (for Individual) Neuropsychologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2018  
**Transaction ID : SA11AI.8079**  
 Amount of Each Receipt this Period  
 600.00  
 Memo Item  
 Contribution to our PAC

**B. Sommer, Marc, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3123 W. Chase  
 City Chicago State IL Zip Code 60645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 756.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2018  
**Transaction ID : SA11AI.8067**  
 Amount of Each Receipt this Period  
 156.00  
 Memo Item  
 Contribution to our PAC

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	756.00
<b>TOTAL</b> This Period (last page this line number only).....	4154.00

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

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

NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

**A. Farwell, Shaina, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5700 N. Magnolia

City Chicago State IL Zip Code 60660

Purpose of Disbursement Typing assistance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 06 / 13 / 2018

FEC Identification Number C

Transaction ID : **SB21B.8056**

Amount of Each Disbursement this Period 180.00

Memo Item

**B. Merchant Services Credit Processing**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement Credit card processing fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 05 / 05 / 2018

FEC Identification Number C

Transaction ID : **SB21B.8082**

Amount of Each Disbursement this Period 29.59

Memo Item

**C. Merchant Services Credit Processing**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement Credit card processing fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 06 / 05 / 2018

FEC Identification Number C

Transaction ID : **SB21B.8081**

Amount of Each Disbursement this Period 163.43

Memo Item

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

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

373.02

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

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

NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

Full Name (Last, First, Middle Initial) <b>A. Molotsky, Alan, E., ,</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018	
Mailing Address 3939 W. Greenwood		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8062</b> Amount of Each Disbursement this Period 679.03	
City Skokie	State IL	Zip Code 60076	Category/ Type 001
Purpose of Disbursement Reimburse refreshements for educational event		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Shallots Restaurant</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2018	
Mailing Address 7016 Carpenter Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8060</b> Amount of Each Disbursement this Period 647.25	
City Skokie	State IL	Zip Code 60077	Category/ Type 001
Purpose of Disbursement Refreshments for educational event		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Shalom Kaufman Design</b>		Date of Disbursement MM / DD / YYYY 05 / 10 / 2018	
Mailing Address 1470 S. Rexford Dr., Suite 301		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8061</b> Amount of Each Disbursement this Period 1105.00	
City Los Angeles	State CA	Zip Code 90035	Category/ Type 003
Purpose of Disbursement Design for new PAC brochure		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2431.28
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**To Protect Our Heritage PAC**

**A. BOYLE, BRENDAN F**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 11545

City PHILADELPHIA State PA Zip Code 19116

Purpose of Disbursement  
Contribution to campaign fund

Candidate Name  
**BOYLE, BRENDAN F**

Office Sought:  House  Senate  President  
State: PA District: 13

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 30 / 2018

FEC Identification Number: C 000543363  
**Transaction ID : SB23.8053**

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. CURBELO, CARLOS**

Full Name (Last, First, Middle Initial)

Mailing Address 8770 SUNSET DRIVE #355

City MIAMI State FL Zip Code 33173

Purpose of Disbursement  
Contribution to campaign fund

Candidate Name  
**CURBELO, CARLOS**

Office Sought:  House  Senate  President  
State: FL District: 26

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 14 / 2018

FEC Identification Number: C c00546846  
**Transaction ID : SB23.8054**

Amount of Each Disbursement this Period: 5000.00

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  
State: District:

Disbursement For:  
 Primary  General  Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5500.00