

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.
ILLINOIS REPUBLICAN PARTY

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 JUDY DIEKELMAN

Signature of Treasurer JUDY DIEKELMAN [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

ILLINOIS REPUBLICAN PARTY

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="2014"/>	<input type="text" value="71003.82"/>	<input type="text" value="71003.82"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="69599.79"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="80078.46"/>	<input type="text" value="207044.54"/>
(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="149678.25"/>	<input type="text" value="278048.36"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="61794.57"/>	<input type="text" value="190164.68"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="87883.68"/>	<input type="text" value="87883.68"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="233419.47"/>	

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

ILLINOIS REPUBLICAN PARTY

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).....	35305.00	118805.00
(ii) Unitemized	20248.00	25213.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	55553.00	144018.00
(b) Political Party Committees	0.00	1500.00
(c) Other Political Committees (such as PACs).....	600.00	6800.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	56153.00	152318.00
12. Transfers From Affiliated/Other Party Committees.....	9950.00	27800.00
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	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	13975.46	26926.54
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	13975.46	26926.54
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	80078.46	207044.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	66103.00	180118.00

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	2725.21	27873.49
(ii) Non-Federal Share.....	5488.54	34682.14
(b) Other Federal Operating Expenditures	2996.01	16405.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	11209.76	78961.15
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	32983.79	32983.79
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	17601.02	78219.74
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	17601.02	78219.74
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	61794.57	190164.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56306.03	155482.54

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)	56153.00	152318.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	56153.00	152318.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5721.22	44279.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5721.22	44279.01

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

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

FOR LINE NUMBER: PAGE 6 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
ILLINOIS REPUBLICAN PARTY

A. RAYMOND BOGENRIEF
 Full Name (Last, First, Middle Initial)
 Mailing Address 161 W KINZIE ST. #1712
 City CHICAGO State IL Zip Code 60654
 Date of Receipt: 04 / 18 / 2014
Transaction ID : SA11AI.5576
 Amount of Each Receipt this Period: 250.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 250.00

B. EUGENE DAWSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 808 LILL STREET
 City BARRINGTON State IL Zip Code 60010-4266
 Date of Receipt: 04 / 21 / 2014
Transaction ID : SA11AI.5500
 Amount of Each Receipt this Period: 100.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation SUPERVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 400.00

C. DEB GORDILS
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 PROSPECT
 City ELMURST State IL Zip Code 60126
 Date of Receipt: 04 / 30 / 2014
Transaction ID : SA11AI.5704
 Amount of Each Receipt this Period: 500.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation RADIO TALK SHOW HOST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
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 7 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
ILLINOIS REPUBLICAN PARTY

A. DONALD GOSS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4807 JOHNSON AVENUE
 City WESTERN SPRINGS State IL Zip Code 60558-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014
Transaction ID : SA11AI.5588
 Amount of Each Receipt this Period
 255.00

B. DAVID W GRAINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 GRAINGER PARKWAY
 City LAKE FOREST State IL Zip Code 60045-5202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer W. W. GRAINGER, INC. Occupation SENIOR CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2014
Transaction ID : SA11AI.5596
 Amount of Each Receipt this Period
 10000.00

C. AUGUST GREIDANUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 CUTTERS MILL LANE
 City SCHAUMBURG State IL Zip Code 60194-4534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PART-TIME CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014
Transaction ID : SA11AI.5578
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	10505.00
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: PAGE 8 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. DIETRICH GROSS
Mailing Address 769 MICHIGAN AVENUE
City State Zip Code
WILMETTE IL 60091-1956
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
JUPITER ALUMINUM CORPORATION CEO
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 21 / 2014
Transaction ID : SA11AI.5580
Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. DAVID D HILLER
Mailing Address 1550 N STATE PARKWAY
APT. 301
City State Zip Code
CHICAGO IL 60610-7929
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
ROBERT R. MCCORMACK FOUNDATION MANAGER
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 22 / 2014
Transaction ID : SA11AI.5590
Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. FRANCIS JAHN
Mailing Address 306 W CHURCH
City State Zip Code
CHAMPAIGN IL 61820
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
MEYER, CAPEL, MUNCY, JAHN, ALD ATTORNEY
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 21 / 2014
Transaction ID : SA11AI.5582
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
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: PAGE 9 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
ILLINOIS REPUBLICAN PARTY

A. RICHARD KASSULAT
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 W FRONTAGE RD S
 City State Zip Code
 BOLINGBROOK IL 60440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 KASSULAT ENTERPRISES BUSINESS OWNER
 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
 04 / 08 / 2014
Transaction ID : SA11AI.5592
 Amount of Each Receipt this Period
 1000.00

B. VINCENT KOLBER
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 W MADISON STREET
 SUITE 2340
 City State Zip Code
 CHICAGO IL 60602-4919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RESIDCO PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2014
Transaction ID : SA11AI.5710
 Amount of Each Receipt this Period
 500.00

C. WILLIAM KUNKLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 N LAKE SHORE DRIVE
 City State Zip Code
 CHICAGO IL 60610-6686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CC INDUSTRIES EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014
Transaction ID : SA11AI.5594
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6500.00
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: PAGE 10 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
ILLINOIS REPUBLICAN PARTY

A. JANE LIVINGSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2025 E LINCOLN APT 2209
 City BLOOMINGTON State IL Zip Code 61701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014
Transaction ID : SA11AI.5572
 Amount of Each Receipt this Period
 200.00

B. ROBERT MALOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 E RANDOLPH STREET
 City CHICAGO State IL Zip Code 60601-6436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2014
Transaction ID : SA11AI.5600
 Amount of Each Receipt this Period
 5000.00

C. JOSEPH NERO
 Full Name (Last, First, Middle Initial)
 Mailing Address 16830 GAYNELLE
 City TINLEY PARK State IL Zip Code 60477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BROADWAY IN CHICAGO TICKET SELLER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014
Transaction ID : SA11AI.5702
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5450.00
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: PAGE 11 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. RANDY NEWBERRY

Mailing Address 221 S STATE STREET

City State Zip Code
JERSEYVILLE IL 62052-1851

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

Name of Employer Occupation
PRESCRIPTION SHOP PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2014
Transaction ID : SA11AI.5584

Amount of Each Receipt this Period
250.00

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

Mailing Address 71 S WACKER DRIVE
SUITE 500

City State Zip Code
CHICAGO IL 60606-4673

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

Name of Employer Occupation
GOLDMAN, SACHS AND CO. INVESTMENT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2014
Transaction ID : SA11AI.5598

Amount of Each Receipt this Period
10000.00

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

Mailing Address PO BOX 128

City State Zip Code
OHIO IL 61349-0128

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

Name of Employer Occupation
SISLER DAIRY MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014
Transaction ID : SA11AI.5586

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	10500.00
TOTAL This Period (last page this line number only).....▶	35305.00

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

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

FOR LINE NUMBER: PAGE 12 OF 34
(check only one)

<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
------------------------------	------------------------------	-----------------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)
ILLINOIS REPUBLICAN PARTY

A. VOLUNTEERS FOR SHIMKUS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 661
City COLLINSVILLE State IL Zip Code 62234
FEC ID number of contributing federal political committee. **C** C00258855
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 01 / 2014
Transaction ID : SA11C.4580
Amount of Each Receipt this Period
600.00
In-kind - RENT

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

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

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

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

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	600.00

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

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

FOR LINE NUMBER: PAGE 13 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)
A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 1ST STREET SE

City WASHINGTON State DC Zip Code 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
27800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2014
Transaction ID : SA12.4571

Amount of Each Receipt this Period
9950.00

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

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

Amount of Each Receipt this Period

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	9950.00
TOTAL This Period (last page this line number only).....▶	9950.00

**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"/> 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

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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. COLE TAYLOR BANK

Mailing Address P.O. BOX 804427

City State Zip Code
CHICAGO IL 60680

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	16	/	2014

Transaction ID : **SB21B.4552**

Amount of Each Disbursement this Period

284.46

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 144 2ND STREET
1ST FLOOR

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	08	/	2014

Transaction ID : **SB21B.4534**

Amount of Each Disbursement this Period

1.28

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 144 2ND STREET
1ST FLOOR

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	10	/	2014

Transaction ID : **SB21B.4533**

Amount of Each Disbursement this Period

2.12

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

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

287.86

--

**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"/> 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

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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 144 2ND STREET
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2014

Transaction ID : SB21B.4532

Amount of Each Disbursement this Period

10.64

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 144 2ND STREET
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 16 / 2014

Transaction ID : SB21B.4531

Amount of Each Disbursement this Period

6.38

Full Name (Last, First, Middle Initial)

C. PIRYX

Mailing Address 144 2ND STREET
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2014

Transaction ID : SB21B.4530

Amount of Each Disbursement this Period

1.06

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

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

18.08

**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"/> 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

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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. PIRYX

Mailing Address 144 2ND STREET
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
MERCHANT FEES

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
04 / 23 / 2014

Transaction ID : SB21B.4529

Amount of Each Disbursement this Period

2.13

Full Name (Last, First, Middle Initial)

B. PIRYX

Mailing Address 144 2ND STREET
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
MERCHANT FEES

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
04 / 30 / 2014

Transaction ID : SB21B.4528

Amount of Each Disbursement this Period

7.87

Full Name (Last, First, Middle Initial)

C. REVOLVIS CONSULTING, INC.

Mailing Address 400 FIRST STREET, SE
SUITE 200

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
DIRECT MAIL: PRINTING AND POSTAGE - DEBT PAYMENT

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
04 / 23 / 2014

Transaction ID : SB21B.4560

Amount of Each Disbursement this Period

1000.00

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

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

1010.00

**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"/> 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

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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL SERVICE

Date of Disbursement

Mailing Address 2015 E COOK STREET

M M M	/	D D D	/	Y Y Y Y Y
04		08		2014

City State Zip Code
SPRINGFIELD IL 62703

Transaction ID : SB21B.4566

Purpose of Disbursement
POSTAGE

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

500.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. UNITED STATES POSTAL SERVICE

Date of Disbursement

Mailing Address 2015 E COOK STREET

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

City State Zip Code
SPRINGFIELD IL 62703

Transaction ID : SB21B.4559

Purpose of Disbursement
POSTAGE

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

500.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. VOLUNTEERS FOR SHIMKUS

Date of Disbursement

Mailing Address PO BOX 661

M M M	/	D D D	/	Y Y Y Y Y
04		01		2014

City State Zip Code
COLLINSVILLE IL 62234

Transaction ID : SB21B.4581

Purpose of Disbursement
In-kind - RENT

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

600.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

1600.00

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

2915.94

**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

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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. BANK ADJUSTMENT

Mailing Address PO BOX 64897

City State Zip Code
CHICAGO IL 60664

Purpose of Disbursement
BANK ADJUSTMENT

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 Y
04 / 30 / 2014

Transaction ID : SB29.4576

Amount of Each Disbursement this Period

32983.79

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 / 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 / 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)..... ▶

32983.79

32983.79

**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

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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. ADVANTAGE PAYROLL SERVICES

Mailing Address PO BOX 1330

City AUBURN State ME Zip Code 04211

Purpose of Disbursement
PAYROLL FEES AND TAXES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : SB30B.4572

Amount of Each Disbursement this Period

2657.14

B. ADVANTAGE PAYROLL SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1330

City AUBURN State ME Zip Code 04211

Purpose of Disbursement
PAYROLL FEES AND TAXES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2014

Transaction ID : SB30B.4519

Amount of Each Disbursement this Period

2667.64

C. ANDREW COLLINS

Full Name (Last, First, Middle Initial)

Mailing Address 308 S MAIN ST, #10

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : SB30B.4573

Amount of Each Disbursement this Period

1262.45

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

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

6587.23

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

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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. ANDREW COLLINS

Mailing Address 308 S MAIN ST, #10

City State Zip Code
EDWARDSVILLE IL 62025

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2014

Transaction ID : SB30B.4516

Amount of Each Disbursement this Period

1262.46

Full Name (Last, First, Middle Initial)

B. JAYME ODOM

Mailing Address 1401 S STATE ST APT 2111

City State Zip Code
CHICAGO IL 60605

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2014

Transaction ID : SB30B.4575

Amount of Each Disbursement this Period

2615.58

Full Name (Last, First, Middle Initial)

C. JAYME ODOM

Mailing Address 1401 S STATE ST APT 2111

City State Zip Code
CHICAGO IL 60605

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2014

Transaction ID : SB30B.4517

Amount of Each Disbursement this Period

2615.58

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

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

6493.62

**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

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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. ANDREW WELHOUSE

Mailing Address 303 S. HALSTED STREET
APT. 2

City CHICAGO State IL Zip Code 60661

Purpose of Disbursement
PAYROLL

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
04 / 14 / 2014

Transaction ID : SB30B.4574

Amount of Each Disbursement this Period

2260.08

Full Name (Last, First, Middle Initial)

B. ANDREW WELHOUSE

Mailing Address 303 S. HALSTED STREET
APT. 2

City CHICAGO State IL Zip Code 60661

Purpose of Disbursement
PAYROLL

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
04 / 29 / 2014

Transaction ID : SB30B.4518

Amount of Each Disbursement this Period

2260.09

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)..... ▶

4520.17

17601.02

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AIRNET GROUP, INC.	Nature of Debt (Purpose): VOLUNTEER PHONE MINUTES
Mailing Address 801 BROAD STREET	
City State Zip Code CHATTANOOGA TN 37402	

Outstanding Balance Beginning This Period 49681.51	Transaction ID : SD10.4202	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 49681.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECT MAIL SYSTEMS	Nature of Debt (Purpose): DIRECT MAIL: PRINTING AND POSTAGE
Mailing Address 12450 AUTOMOBILE BLVD.	
City State Zip Code CLEARWATER FL 33762	

Outstanding Balance Beginning This Period 7420.15	Transaction ID : SD10.4199	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7420.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS CONNECT, LLC	Nature of Debt (Purpose): TELEMARKETING
Mailing Address 7300 HUDSON BLVD., N	
City State Zip Code SAINT PAUL MN 55128	

Outstanding Balance Beginning This Period 43348.00	Transaction ID : SD10.4210	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 43348.00

1) SUBTOTALS This Period This Page (optional)..... ▶	100449.66
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 34
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MAILFINANCE, NEOPOST USA	Nature of Debt (Purpose): POSTAGE SYSTEM
Mailing Address 1335 VALWOOD PARKWAY, STE. 111	
City State Zip Code CARROLLTON TX 75006	

Outstanding Balance Beginning This Period 5388.24	Transaction ID : SD10.4223	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5388.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MK 55 WEST INVESTOR, LLC	Nature of Debt (Purpose): OFFICE RENT
Mailing Address 55 W. MONROE STREET	
City State Zip Code CHICAGO IL 60603	

Outstanding Balance Beginning This Period 31083.36	Transaction ID : SD10.4219	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 31083.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor REVOLVIS CONSULTING, INC.	Nature of Debt (Purpose): DIRECT MAIL: PRINTING AND POSTAGE
Mailing Address 400 FIRST STREET, SE SUITE 200	
City State Zip Code WASHINGTON DC 20003	

Outstanding Balance Beginning This Period 45951.95	Transaction ID : SD10.4213	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 44951.95

1) SUBTOTALS This Period This Page (optional)..... ▶	81423.55
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor STAPLES	Nature of Debt (Purpose): OFFICE SUPPLIES
Mailing Address 111 N. WABASH AVENUE	
City State Zip Code CHICAGO IL 60602	

Outstanding Balance Beginning This Period 4246.26	Transaction ID : SD10.4208	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4246.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor STONERIDGE GROUP	Nature of Debt (Purpose): WEB HOSTING
Mailing Address 4400 N. POINT PKWY, #190	
City State Zip Code ALPHARETTA GA 30022	

Outstanding Balance Beginning This Period 5700.00	Transaction ID : SD10.4221	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5700.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor TARGETED CREATIVE COMMUNICATIONS, INC.	Nature of Debt (Purpose): DIRECT MAIL: PRINTING AND POSTAGE
Mailing Address 106 S. COLUMBUS ST	
City State Zip Code ALEXANDRIA VA 22314	

Outstanding Balance Beginning This Period 41600.00	Transaction ID : SD10.4204	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 41600.00

1) SUBTOTALS This Period This Page (optional)..... ▶	51546.26
2) TOTALS This Period (last page this line number only)..... ▶	233419.47
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	233419.47

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

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 2.25.14 Fundraising Event (02/25/2014)</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input checked="" type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p> <p style="text-align: center;">Transaction ID : H2.4578</p>	<p style="text-align: center;">FEDERAL %</p> <p style="text-align: center;">64.00 %</p>	<p style="text-align: center;">NONFEDERAL %</p> <p style="text-align: center;">36.00 %</p>
<p>ACTIVITY OR EVENT IDENTIFIER 3.19.14 Fundraising Event (03/19/2014)</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input checked="" type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p> <p style="text-align: center;">Transaction ID : H2.4579</p>	<p style="text-align: center;">FEDERAL %</p> <p style="text-align: center;">75.00 %</p>	<p style="text-align: center;">NONFEDERAL %</p> <p style="text-align: center;">25.00 %</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>

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

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

NAME OF ACCOUNT ILLINOIS REPUBLICAN PARTY	DATE OF RECEIPT MM / DD / YYYY 04 / 23 / 2014	TOTAL AMOUNT TRANSFERRED 13975.46
----------------------------------------------	-----------------------------------------------------	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	3503.18	Transaction ID : H3.4570
ii) Generic Voter Drive		
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event Identifier)		
a) 2.25.14 Fundraising Event (02/25/2014)	7282.91	Transaction ID : H3.4570.0
b) 3.19.14 Fundraising Event (03/19/2014)	3189.37	Transaction ID : H3.4570.1
c) Total Amount Transferred For Direct Fundraising	10472.28	
v) Direct Candidate Support (List Activity or Event Identifier)		
a) _____		
b) _____		
c) Total Amount Transferred For Direct Candidate Support.....		
vi) Public Communications Referring Only to Party (Made by PAC)		

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	3503.18
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	10472.28
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	13975.46

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) THE STATEHOUSE INN		Transaction ID : H4.4526		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 101 E. ADAMS STREET				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City SPRINGFIELD State IL Zip Code 62701				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: LODGING		002		Allocated Activity or Event Year-To-Date 21384.76	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 11 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
28.22				106.17	
		=		TOTAL AMOUNT	
				134.39	

B. Full Name (Last, First, Middle Initial) THE STATEHOUSE INN		Transaction ID : H4.4527		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 101 E. ADAMS STREET				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City SPRINGFIELD State IL Zip Code 62701				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: LODGING		002		Allocated Activity or Event Year-To-Date 21519.15	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 11 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
28.22				106.17	
		=		TOTAL AMOUNT	
				134.39	

C. Full Name (Last, First, Middle Initial) ROSS ISAAC RESTAURANT		Transaction ID : H4.4550		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1710 S. MACARTHUR BLVD.				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City SPRINGFIELD State IL Zip Code 62704				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: MEETING EXPENSE: MEALS		001		Allocated Activity or Event Year-To-Date 21802.43	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 14 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
59.49				223.79	
		=		TOTAL AMOUNT	
				283.28	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
115.93		436.13		552.06

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)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) WALGREENS		Transaction ID : H4.4548		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 79 W. MONROE STREET				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code CHICAGO IL 60603				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE SUPPLIES		001		Allocated Activity or Event Year-To-Date 21819.89	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 15 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
3.67				13.79	
		=		TOTAL AMOUNT	
				17.46	

B. Full Name (Last, First, Middle Initial) JIMMY JOHN'S GOURMET SANDWICHES		Transaction ID : H4.4541		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 6 E. MADISON STREET				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code CHICAGO IL 60604				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: MEETING EXPENSE: MEALS		001		Allocated Activity or Event Year-To-Date 21966.52	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 18 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
30.79				115.84	
		=		TOTAL AMOUNT	
				146.63	

C. Full Name (Last, First, Middle Initial) FEDEX		Transaction ID : H4.4543		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 942 S. SHADY GROVE ROAD				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code MEMPHIS TN 38119				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: DELIVERY SERVICES		001		Allocated Activity or Event Year-To-Date 21998.52	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 18 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
0.00				32.00	
		=		TOTAL AMOUNT	
				32.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.46		161.63		196.09

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)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4545 FEDEX		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 942 S. SHADY GROVE ROAD		Allocated Activity or Event Year-To-Date _____ 22030.52	
City MEMPHIS State TN Zip Code 38119	001 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: DELIVERY SERVICES		Allocated Activity or Event Year-To-Date _____ 22030.52	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 6.72 _____ 25.28 _____ 32.00			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4546 FEDEX		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 942 S. SHADY GROVE ROAD		Allocated Activity or Event Year-To-Date _____ 22062.52	
City MEMPHIS State TN Zip Code 38119	001 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: DELIVERY SERVICES		Allocated Activity or Event Year-To-Date _____ 22062.52	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 6.72 _____ 25.28 _____ 32.00			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.4547 FEDEX		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 942 S. SHADY GROVE ROAD		Allocated Activity or Event Year-To-Date _____ 22086.52	
City MEMPHIS State TN Zip Code 38119	001 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: DELIVERY SERVICES		Allocated Activity or Event Year-To-Date _____ 22086.52	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
_____ 5.04 _____ 18.96 _____ 24.00			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 18.48		_____ 69.52		_____ 88.00

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)

ILLINOIS REPUBLICAN PARTY

Form A: WEST BEND MUTUAL INSURANCE. Transaction ID: H4.4540. Allocated Activity or Event: Administrative. Date: 04/22/2014. Total Amount: 434.41.

Form B: COMED. Transaction ID: H4.4557. Allocated Activity or Event: Administrative. Date: 04/23/2014. Total Amount: 71.54.

Form C: ALPHAGRAPHS. Transaction ID: H4.4558. Allocated Activity or Event: Administrative. Date: 04/23/2014. Total Amount: 203.85.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 149.06, 560.74, 709.80.

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)

ILLINOIS REPUBLICAN PARTY

Form A: RED CURVE SOLUTIONS, Transaction ID: H4.4561. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form B: NORTH SHORE PRINTERS, Transaction ID: H4.4563. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form C: COMED, Transaction ID: H4.4564. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 723.97, NONFEDERAL SHARE 2723.50, TOTAL AMOUNT 3447.47

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

Form A: STAPLES, Transaction ID: H4.4539. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (OFFICE SUPPLIES), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (04/25/2014), and amounts: FEDERAL SHARE 17.68, NONFEDERAL SHARE 66.52, TOTAL AMOUNT 84.20.

Form B: PRET A MANGER, Transaction ID: H4.4535. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (MEETING EXPENSE: MEALS), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (04/28/2014), and amounts: FEDERAL SHARE 4.11, NONFEDERAL SHARE 15.47, TOTAL AMOUNT 19.58.

Form C: KENNEDY CHIGLO, Transaction ID: H4.4553. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (PAYROLL), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (04/30/2014), and amounts: FEDERAL SHARE 34.45, NONFEDERAL SHARE 129.62, TOTAL AMOUNT 164.07.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 56.24, NONFEDERAL SHARE 211.61, TOTAL AMOUNT 267.85.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.4555 MATT FERGUSON PHOTOGRAPHY & PRODUCTIONS		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" 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 1205 GREENWOOD DRIVE		Allocated Activity or Event Year-To-Date 29264.62	
City State Zip Code WHEATON IL 60189	003 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: PHOTOGRAPHY SERVICES		Allocated Activity or Event Year-To-Date 29264.62	
Activity or Event Identifier: 2.25.14 Fundraising Event(02/25/2014)		Date <input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="534.40"/>		<input type="text" value="300.60"/>	<input type="text" value="835.00"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.4567 SARA KARLOVICS		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" 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 PO BOX 7941		Allocated Activity or Event Year-To-Date 7578.75	
City State Zip Code GURNEE IL 60031	003 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: FUNDRAISING CONSULTING		Allocated Activity or Event Year-To-Date 7578.75	
Activity or Event Identifier: 3.19.14 Fundraising Event(03/19/2014)		Date <input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="900.00"/>		<input type="text" value="300.00"/>	<input type="text" value="1200.00"/>

C. Full Name (Last, First, Middle Initial)		Allocated Activity or Event: <input 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		Allocated Activity or Event Year-To-Date	
City State Zip Code	Category/ Type	Date	
Purpose of Disbursement: Activity or Event Identifier:		Allocated Activity or Event Year-To-Date	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text"/>		<input type="text"/>	<input type="text"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1434.40"/>		<input type="text" value="600.60"/>		<input type="text" value="2035.00"/>

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
<input type="text" value="2725.21"/>		<input type="text" value="5488.54"/>		<input type="text" value="8213.75"/>