



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**To Protect Our Heritage PAC**

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

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2013"/>  |                         | 229522.71                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 226398.37               |                                   |
| (c) Total Receipts (from Line 19) .....  | 10422.85                | 10817.85                          |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 236821.22               | 240340.56                         |
| 7. Total Disbursements (from Line 31).....   | 10249.45                | 13768.79                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 226571.77               | 226571.77                         |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**To Protect Our Heritage PAC**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 5750.00                       | 5750.00                           |
| (ii) Unitemized .....   | 2961.00                       | 3356.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 8711.00                       | 9106.00                           |
| (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) .....  | 8711.00                       | 9106.00                           |
| 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.....           | 1000.00                       | 1000.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 711.85                        | 711.85                            |
| 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))..... ▶                        | 10422.85                      | 10817.85                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 10422.85                      | 10817.85                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 3899.45                       | 4568.79                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 3899.45                       | 4568.79                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 6350.00                       | 9200.00                           |
| 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 .....  | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 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)) ..      | 10249.45                      | 13768.79                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 10249.45                      | 13768.79                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 8711.00                       | 9106.00                           |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 8711.00                       | 9106.00                           |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 3899.45                       | 4568.79                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 3899.45                       | 4568.79                           |

**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 21                 |
|   | <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. Sanford L Barr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 832 Dauphine Court  
 City Northbrook State IL Zip Code 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Sanford L. Barr, DDS Occupation Dentist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **11 / 29 / 2013**  
**Transaction ID : SA11AI.6856**  
 Amount of Each Receipt this Period **1000.00**  
 Contribution to our PAC

**B. Marlys Beider**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1242 N. Lake Shore Drive  
 City Chicago State IL Zip Code 60610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Hotel Owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 20 / 2013**  
**Transaction ID : SA11AI.6855**  
 Amount of Each Receipt this Period **250.00**  
 Contribution to our PAC

**C. Herb Cohen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42 Berkshire Road  
 City Wheeling State IL Zip Code 60090  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Accountant  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt **12 / 09 / 2013**  
**Transaction ID : SA11AI.6866**  
 Amount of Each Receipt this Period **250.00**  
 Contribution to our PAC

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>1500.00</b> |
| <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 21  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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

**A. William DeWoskin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1000 N. Lakeshore Dr., #27B  
 City Chicago State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Real Estate Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 15 / 2013  
**Transaction ID : SA11AI.6857**  
 Amount of Each Receipt this Period 1000.00  
 Contribution to our PAC

**B. Steven Edelson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3602 Walters Ave.  
 City Northbrook State IL Zip Code 60062  
 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 ▼ 250.00

Date of Receipt 11 / 21 / 2013  
**Transaction ID : SA11AI.6864**  
 Amount of Each Receipt this Period 250.00  
 Contribution to our PAC

**C. Shayle Gerstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9655 Woods Dr.  
 City Skokie State IL Zip Code 60077  
 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 ▼ 250.00

Date of Receipt 11 / 27 / 2013  
**Transaction ID : SA11AI.6862**  
 Amount of Each Receipt this Period 250.00  
 Contribution to our PAC

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 1500.00 |
| <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 21  |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

**A. Dr. Burton Herbstman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1154 Stratford

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Deerfield | State<br>IL | Zip Code<br>60015 |
|-------------------|-------------|-------------------|

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

|   |                         |
|---|-------------------------|
| Name of Employer<br>Northwest Heart Specialists | Occupation<br>Physician |
|---|-------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 29    | / | 2013        |

**Transaction ID : SA11AI.6863**

Amount of Each Receipt this Period  
250.00

Contribution to our PAC

**B. Gerald Lewis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3948 Raintree Lane

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Northbrook | State<br>IL | Zip Code<br>60062 |
|--------------------|-------------|-------------------|

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

|  |                         |
|--|-------------------------|
| Name of Employer<br>Primary Care Medical Specialis | Occupation<br>Physician |
|--|-------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 14    | / | 2013        |

**Transaction ID : SA11AI.6861**

Amount of Each Receipt this Period  
250.00

Contribution to our PAC

**C. Nathan Lichtenstein**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3648 Grove

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Skokie | State<br>IL | Zip Code<br>60076 |
|----------------|-------------|-------------------|

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

|  |                        |
|--|------------------------|
| Name of Employer<br>Aronberg Goldgehn Davis & Garm | Occupation<br>Attorney |
|--|------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 20    | / | 2013        |

**Transaction ID : SA11AI.6869**

Amount of Each Receipt this Period  
250.00

Contribution to our PAC

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 750.00 |
| <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 21 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |              |
|   | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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

**A. Seymour Lipton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8921 Kenton

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>Skokie | State<br>IL | Zip Code<br>60076 |
|----------------|-------------|-------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>Retired | Occupation<br>Retired |
|-----------------------------|-----------------------|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 20    | / | 2013        |

**Transaction ID : SA11AI.6860**

Amount of Each Receipt this Period  
250.00

Contribution to our PAC

**B. Max Lorig**  
Full Name (Last, First, Middle Initial)  
Mailing Address 718 Carlyle Court

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Northbrook | State<br>IL | Zip Code<br>60062 |
|--------------------|-------------|-------------------|

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

|  |                              |
|--|------------------------------|
| Name of Employer<br>Lorig Construction | Occupation<br>Civil engineer |
|--|------------------------------|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 27    | / | 2013        |

**Transaction ID : SA11AI.6858**

Amount of Each Receipt this Period  
1000.00

Contribution to our PAC

**C. Steven Rothke**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7633 N. Arcadia

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>Morton Grove | State<br>IL | Zip Code<br>60053 |
|----------------------|-------------|-------------------|

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

|   |                                 |
|---|---------------------------------|
| Name of Employer<br>NeuroBehavior & Rehab Network | Occupation<br>Neuropsychologist |
|---|---------------------------------|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 21    | / | 2013        |

**Transaction ID : SA11AI.6859**

Amount of Each Receipt this Period  
250.00

Contribution to our PAC

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 1500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER: PAGE 10 OF 21  
(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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

**A.** Full Name (Last, First, Middle Initial)  
**Alfred Siegel**

Mailing Address 270 E. Pearson, 901

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Chicago | State<br>IL | Zip Code<br>60611 |
|-----------------|-------------|-------------------|

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

|                                   |                          |
|-----------------------------------|--------------------------|
| Name of Employer<br>Self-employed | Occupation<br>Consultant |
|-----------------------------------|--------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    | / | 01    | / | 2013        |

**Transaction ID : SA11Al.6871**

Amount of Each Receipt this Period  
500.00

Contribution to our PAC

**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 M | / | D 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 M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 500.00  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 5750.00 |

**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 21  
(check only one)

|                              |                              |                              |                             |                             |                             |                             |                             |  |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|

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

**A.** Full Name (Last, First, Middle Initial)  
**1st Equity Bank Northwest**

Mailing Address 1330 Dundee

City Buffalo Grove State IL Zip Code 60089

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
711.85

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2013

**Transaction ID : SA17.6890**

Amount of Each Receipt this Period  
711.85

Interest from Bank

**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

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 711.85 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 711.85 |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 12 OF 21 |
|   | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input checked="" 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. MARK STEVEN KIRK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 275 Whistler Rd.  
 City Highland Park State IL Zip Code 60035  
 FEC ID number of contributing federal political committee. **C** H0IL10120  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2013  
**Transaction ID : SA16.6892**  
 Amount of Each Receipt this Period  
 1000.00  
 Check Reported 6/7/13 never deposited. Not re-sent.

**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

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 1000.00 |

**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 |

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

Full Name (Last, First, Middle Initial)

**A. Constant Contact .com**

Mailing Address 1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Website management fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 14 / 2013

Transaction ID : SB21B.6840

Amount of Each Disbursement this Period

233.36

Full Name (Last, First, Middle Initial)

**B. Constant Contact .com**

Mailing Address 1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Website management fees

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 11 / 2013

Transaction ID : SB21B.6834

Amount of Each Disbursement this Period

175.32

Full Name (Last, First, Middle Initial)

**C. Constant Contact .com**

Mailing Address 1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Website management fee

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 30 / 2013

Transaction ID : SB21B.6835

Amount of Each Disbursement this Period

116.88

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

525.56

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

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

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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 |

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

Full Name (Last, First, Middle Initial)

**A. First Data Credit Processing**

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement  
Credit card processing fees

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 05 / 2013

Transaction ID : SB21B.6842

Amount of Each Disbursement this Period

62.90

Full Name (Last, First, Middle Initial)

**B. First Data Credit Processing**

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement  
Credit card processing fees

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2013

Transaction ID : SB21B.6843

Amount of Each Disbursement this Period

22.95

Full Name (Last, First, Middle Initial)

**C. First Data Credit Processing**

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement  
Credit card processing fees

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2013

Transaction ID : SB21B.6844

Amount of Each Disbursement this Period

22.95

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

108.80

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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 |

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

Full Name (Last, First, Middle Initial)

### A. First Data Credit Processing

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement  
Credit card processing fees

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 05    |   | 2013        |

Transaction ID : SB21B.6845

Amount of Each Disbursement this Period

|       |
|-------|
| 22.95 |
|-------|

Full Name (Last, First, Middle Initial)

### B. First Data Credit Processing

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement  
Credit card processing fees

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 05    |   | 2013        |

Transaction ID : SB21B.6846

Amount of Each Disbursement this Period

|       |
|-------|
| 22.95 |
|-------|

Full Name (Last, First, Middle Initial)

### C. First Data Credit Processing

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement  
Credit card processing fees

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    |   | 05    |   | 2013        |

Transaction ID : SB21B.6847

Amount of Each Disbursement this Period

|       |
|-------|
| 92.70 |
|-------|

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

|        |
|--------|
| 138.60 |
|--------|

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

|  |
|--|
|  |
|--|

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

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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 |

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

Full Name (Last, First, Middle Initial)

**A. Go Daddy.com**

Mailing Address 14455 N Hayden Rd #219

City State Zip Code  
Scottsdale AZ 85260

Purpose of Disbursement  
Website domain fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6850**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Go Daddy.com**

Mailing Address 14455 N Hayden Rd #219

City State Zip Code  
Scottsdale AZ 85260

Purpose of Disbursement  
Website domain fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6851**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Kinkos Copy Center**

Mailing Address 8810 Skokie Blvd.

City State Zip Code  
Skokie IL 60077

Purpose of Disbursement  
Printing for mailing to potential contributors

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6838**

Amount of Each Disbursement this Period

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

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



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

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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 |

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

Full Name (Last, First, Middle Initial)

**A. Kinkos Copy Center**

Mailing Address 8810 Skokie Blvd.

City Skokie State IL Zip Code 60077

Purpose of Disbursement  
Printing expenses for mailing to members

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2013

Transaction ID : SB21B.6852

Amount of Each Disbursement this Period

394.24

Full Name (Last, First, Middle Initial)

**B. Stand With Us**

Mailing Address P.O. Box 341069

City Los Angeles State CA Zip Code 90034-1069

Purpose of Disbursement  
Education event expenses - refreshments

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 18 / 2013

Transaction ID : SB21B.6854

Amount of Each Disbursement this Period

212.00

Full Name (Last, First, Middle Initial)

**C. The Mail Post**

Mailing Address 2421 W. Pratt

City Chicago State IL Zip Code 60645

Purpose of Disbursement  
Mailing service and postage

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 16 / 2013

Transaction ID : SB21B.6839

Amount of Each Disbursement this Period

400.00

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

1006.24

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

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

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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 |

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

Full Name (Last, First, Middle Initial)

**A. US Post Office**

Mailing Address Dirkson Federal Office Building

City Chicago State IL Zip Code 60604

Purpose of Disbursement Postage

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.6836**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. BOOKER, CORY A**

Mailing Address PO BOX 32237

City NEWARK State NJ Zip Code 07102

Purpose of Disbursement  
Contribution to political campaign

Candidate Name  
**BOOKER, CORY A**

Office Sought:  House  Senate  President  
Disbursement For: 2013  Primary  General  Other (specify) ▼  
State: NJ District: 00

Date of Disbursement

/  /

**Transaction ID : SB23.6828**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. DAVIS, RODNEY L**

Mailing Address 305 BEECHWOOD DRIVE

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement  
Contribution to political campaign

Candidate Name  
**DAVIS, RODNEY L**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: IL District: 13

Date of Disbursement

/  /

**Transaction ID : SB23.6826**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. GRAHAM, LINDSEY OLIN**

Mailing Address PO BOX 486

City SENECA State SC Zip Code 29679

Purpose of Disbursement  
Contribution to political campaign

Candidate Name  
**GRAHAM, LINDSEY OLIN**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: SC District: 00

Date of Disbursement

/  /

**Transaction ID : SB23.6827**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. LANDRIEU, MARY L**

Mailing Address 405 E CAPITOL STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Contribution to political campaign

011

Candidate Name

**LANDRIEU, MARY L**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: LA District: 00

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2013

**Transaction ID : SB23.6825**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. LIPINSKI, DANIEL WILLIAM**

Mailing Address 4501 GRAND AVENUE

City WESTERN SPRINGS State IL Zip Code 60558

Purpose of Disbursement  
Contribution to political campaign

011

Candidate Name

**LIPINSKI, DANIEL WILLIAM**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 03

Date of Disbursement

MM / DD / YYYY  
11 / 22 / 2013

**Transaction ID : SB23.6829**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. QUIGLEY FOR CONGRESS**

Mailing Address PO Box 13040

City Chicago State IL Zip Code 60613

Purpose of Disbursement  
Contribution to Political Campaign

011

Candidate Name

**QUIGLEY FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 05

Date of Disbursement

MM / DD / YYYY  
07 / 12 / 2013

**Transaction ID : SB23.6817**

Amount of Each Disbursement this Period

500.00

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

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

2000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. ROBERTS, PAT**

Mailing Address PO BOX 792

City DODGE CITY State KS Zip Code 67801

Purpose of Disbursement  
Contribution to political campaign

011

Candidate Name

**ROBERTS, PAT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: KS District: 00

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2013

Transaction ID : **SB23.6833**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**B. ROSKAM, PETER**

Mailing Address 141 Shelley Lane

City Wheaton State IL Zip Code 60187

Purpose of Disbursement  
Contribution to political campaign

011

Candidate Name

**ROSKAM, PETER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

MM / DD / YYYY  
07 / 29 / 2013

Transaction ID : **SB23.6818**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. ROYCE CAMPAIGN COMMITTEE**

Mailing Address PO BOX 3249

City FULLERTON State CA Zip Code 92834

Purpose of Disbursement  
Contribution to political campaign

011

Candidate Name

**ROYCE CAMPAIGN COMMITTEE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 39

Date of Disbursement

MM / DD / YYYY  
10 / 28 / 2013

Transaction ID : **SB23.6830**

Amount of Each Disbursement this Period

750.00

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

2050.00

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

6350.00