

**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="2015"/>		46685.13
(b) Cash on Hand at Beginning of Reporting Period.....	60858.80	
(c) Total Receipts (from Line 19)	22470.00	122012.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	83328.80	168697.78
7. Total Disbursements (from Line 31).....	28389.83	113758.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	54938.97	54938.97
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	175792.01	

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

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).....	11250.00	58000.00
(ii) Unitemized	1220.00	9512.70
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12470.00	67512.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	22470.00	77512.70
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	34.00
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).....	0.00	44465.95
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	44465.95
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	22470.00	122012.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	22470.00	77546.70

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	1597.63	13828.56
(ii) Non-Federal Share.....	2840.30	20132.27
(b) Other Federal Operating Expenditures	564.42	5064.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5002.35	39024.94
22. Transfers to Affiliated/Other Party Committees.....	22.15	22.15
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	2500.00
(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	2500.00
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	23365.33	72211.72
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	23365.33	72211.72
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28389.83	113758.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25549.53	93626.54

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)	22470.00	77512.70
34. Total Contribution Refunds (from Line 28(d))	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22470.00	75012.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2162.05	18892.67
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	34.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2162.05	18858.67

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

AMENDED TO INCLUDE DEPOSITS IN TRANSIT IN THE AMOUNT OF \$1830 NOT ORIGINALLY INCLUDED ON THE REPORT. THE CONTRIBUTIONS ARE AS FOLLOWS: JACIW, KRISTEN 03/18/2015 \$5 ECONOMOS, JAMES 03/24/2015 \$500 DAHL, LINDA 03/26/2015 \$25 SMITKO, KURT 03/27/2015 \$25 DEMONTE, DEMETRA 03/30/2015 \$500 SLATER, LAURIE 03/31/2015 \$500 GARCIA, ANGEL 03/31/2015 \$250 SMITKO, KURT 03/31/2015 \$25. CASH ON HAND IS ADJUSTED ACCORDINGLY.

Form/Schedule:
Transaction ID:

**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 25
	<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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial) A. MS. DEMETRA DEMONTE		Date of Receipt
Mailing Address 1931 SAINT CLAIR DRIVE		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
PEKIN	IL	61554-6334
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10939
Name of Employer	Occupation	Amount of Each Receipt this Period
Dr. Anthony Demonte DDS	Office Manager	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. JAMES P ECONOMOS		Date of Receipt
Mailing Address 106 W BARTLETT AVENUE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2015"/>
City	State	Zip Code
BARTLETT	IL	60103-7880
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10935
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	DENTIST	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) C. ANGEL GARCIA		Date of Receipt
Mailing Address 332 S MICHIGAN AVE #1032		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City	State	Zip Code
CHICAGO	IL	60604
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10942
Name of Employer	Occupation	Amount of Each Receipt this Period
GARCIA GROUP	ATTORNEY	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

A. RYAN HIGGINS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 681371
 City State Zip Code
 SCHAUMBURG IL 60168-1371
 Date of Receipt: 03 / 13 / 2015
 Transaction ID : SA11AI.10844
 Amount of Each Receipt this Period: 4500.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MCDERMOTT WILL AND EMERY LLP
 Occupation: ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 4500.00

B. RYAN HIGGINS
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 681371
 City State Zip Code
 SCHAUMBURG IL 60168-1371
 Date of Receipt: 03 / 20 / 2015
 Transaction ID : SA11AI.10843
 Amount of Each Receipt this Period: 5000.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: MCDERMOTT WILL AND EMERY LLP
 Occupation: ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 9500.00

C. LAURIE SLATER
 Full Name (Last, First, Middle Initial)
 Mailing Address 544 N DEAN ST
 City State Zip Code
 BUSHNELL IL 61422
 Date of Receipt: 03 / 31 / 2015
 Transaction ID : SA11AI.10940
 Amount of Each Receipt this Period: 500.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: SISTER CONSTRUCTION
 Occupation: OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 500.00

SUBTOTAL of Receipts This Page (optional).....▶ 10000.00
TOTAL This Period (last page this line number only).....▶ 11250.00

**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 25
(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
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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 ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 13 / 2015
Transaction ID : SA11C.10876
Amount of Each Receipt this Period
10000.00

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).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	10000.00

**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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. MB FINANCIAL

Mailing Address 800 WEST MADISON STREET

City CHICAGO State IL Zip Code 60607

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.10892**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. SQUARE

Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

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

/ /

Transaction ID : **SB21B.10913**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. SQUARE

Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

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

/ /

Transaction ID : **SB21B.10909**

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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. SQUARE

Mailing Address 1455 MARKET STREET

City State Zip Code
SAN FRANCISCO CA 94103

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
03	/	31	/	2015

Transaction ID : SB21B.10886

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

20.00

360.61

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 checked="" 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)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. ILLINOIS REPUBLICAN PARTY

Mailing Address P.O. BOX 64897

City State Zip Code
CHICAGO IL 60664

Purpose of Disbursement
TRANSFER TO NONFEDERAL ACCOUNT- ALLOCATION CORRECTION

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
03	/	12	/	2015

Transaction ID : SB22.10916

Amount of Each Disbursement this Period

22.15

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

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

22.15

22.15

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. ADVANTAGE PAYROLL SERVICES

Mailing Address 1000 EAST WARRENVILLE RD
#200

City NAPERVILLE State IL Zip Code 60563

Purpose of Disbursement
PAYROLL TAXES & FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.10903

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ADVANTAGE PAYROLL SERVICES

Mailing Address 1000 EAST WARRENVILLE RD
#200

City NAPERVILLE State IL Zip Code 60563

Purpose of Disbursement
PAYROLL TAXES & FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.10878

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. KRISTEN JACIW

Mailing Address 1305 MAPLE AVE
#3w

City EVANSTON State IL Zip Code 60201

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.10883

Amount of Each Disbursement this Period

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. NICHOLAS KLITZING

Mailing Address 2 W OLD STATE CAPITOL PLAZA

City SPRINGFIELD State IL Zip Code 62701

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
03 / 13 / 2015

Transaction ID : SB30B.10907

Amount of Each Disbursement this Period

2629.25

Full Name (Last, First, Middle Initial)

B. NICHOLAS KLITZING

Mailing Address 2 W OLD STATE CAPITOL PLAZA

City SPRINGFIELD State IL Zip Code 62701

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
03 / 31 / 2015

Transaction ID : SB30B.10885

Amount of Each Disbursement this Period

2629.24

Full Name (Last, First, Middle Initial)

C. JAMES SCHULTZ

Mailing Address 55 W MONROE
STE 940

City CHICAGO State IL Zip Code 60603

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
03 / 13 / 2015

Transaction ID : SB30B.10905

Amount of Each Disbursement this Period

1391.72

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

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

6650.21

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

A. JAMES SCHULTZ

Mailing Address 55 W MONROE
STE 940

City CHICAGO State IL Zip Code 60603

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.10881

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ANDREW WEISSERT

Mailing Address 55 W MONROE
STE 940

City CHICAGO State IL Zip Code 60603

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.10904

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ANDREW WEISSERT

Mailing Address 55 W MONROE
STE 940

City CHICAGO State IL Zip Code 60603

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB30B.10879

Amount of Each Disbursement this Period

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 25
	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 43181.51	Transaction ID : SD10.4202	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 43181.51

B. 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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor JOHN HANCOCK LIFE INSURANCE COMPANY	Nature of Debt (Purpose): RENT
Mailing Address REAL ESTATE DIVISION	
City State Zip Code BUFFALO NY 14240	

Outstanding Balance Beginning This Period 6281.54	Transaction ID : SD10.11511	
Amount Incurred This Period 3140.77	Payment This Period 0.00	Outstanding Balance at Close of This Period 9422.31

1) SUBTOTALS This Period This Page (optional)..... ▶	95951.82
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 25
	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 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 36451.95	Transaction ID : SD10.4213	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 36451.95

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 38000.00	Transaction ID : SD10.4204	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 38000.00

1) SUBTOTALS This Period This Page (optional)..... ▶	79840.19
2) TOTALS This Period (last page this line number only)..... ▶	175792.01
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) ▶	175792.01

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) STAPLES		Transaction ID : H4.10911	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 111 N. WABASH AVENUE			Allocated Activity or Event Year-To-Date 26867.28	
City CHICAGO	State IL	Zip Code 60602	Date <input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type	Date <input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2015"/>	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
40.17			71.41	
		=	TOTAL AMOUNT	
			111.58	

B. Full Name (Last, First, Middle Initial) KENNEDY CHIGLO		Transaction ID : H4.10906	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 2211 N BISSELL APT 3			Allocated Activity or Event Year-To-Date 27452.87	
City CHICAGO	State IL	Zip Code 60614	Date <input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: PAYROLL < 25% FED		Category/ Type	Date <input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
210.81			374.78	
		=	TOTAL AMOUNT	
			585.59	

C. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES		Transaction ID : H4.10932	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 PO BOX 36647-1CF			Allocated Activity or Event Year-To-Date 27921.07	
City DALLAS	State TX	Zip Code 75235	Date <input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: TRAVEL: AIR		Category/ Type	Date <input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
168.55			299.65	
		=	TOTAL AMOUNT	
			468.20	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
419.53		745.84		1165.37

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) THORNTONS		Transaction ID : H4.10900	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 2171 S 8TH ST			Allocated Activity or Event Year-To-Date 27956.47	
City WEST DUNDEE	State IL	Zip Code 60118	Date 03 / 16 / 2015	
Purpose of Disbursement: TRAVEL: FUEL		Category/ Type	Date 03 / 16 / 2015	
Activity or Event Identifier: Administrative			Date 03 / 16 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	
12.74			22.66	
		=	TOTAL AMOUNT	
			35.40	

B. Full Name (Last, First, Middle Initial) TRAVIS STERLING		Transaction ID : H4.10901	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 1950 W ADDISON ST APT 2D			Allocated Activity or Event Year-To-Date 28659.62	
City CHICAGO	State IL	Zip Code 60613	Date 03 / 16 / 2015	
Purpose of Disbursement: REIMBURSEMENT: SEE MEMO ENTRIES		Category/ Type	Date 03 / 16 / 2015	
Activity or Event Identifier: Administrative			Date 03 / 16 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	
253.13			450.02	
		=	TOTAL AMOUNT	
			703.15	

C. Full Name (Last, First, Middle Initial) GODADDY.COM		Transaction ID : H4.10917	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 14455 N HAYDEN RD SUITE 226			Allocated Activity or Event Year-To-Date 28672.79	
City SCOTTSDALE	State AZ	Zip Code 85260	Date 03 / 16 / 2015	
Purpose of Disbursement: WEB HOSTING		Category/ Type	Date 03 / 16 / 2015	
Activity or Event Identifier: Administrative			Date 03 / 16 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	
4.74			8.43	
		=	TOTAL AMOUNT	
			13.17	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
270.61		481.11		751.72

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) PANERA BREAD		Transaction ID : H4.10918	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 5917 N ILLINOIS ST			Allocated Activity or Event Year-To-Date 28672.79		
City FAIRVIEW HEIGHTS	State IL	Zip Code 62208	Date 03 / 16 / 2015		
Purpose of Disbursement: STERLING REIMBURSEMENT: MEETING EXPENSE: MEALS		Category/ Type	Date		
Activity or Event Identifier: Administrative [MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.27			28.92		45.19

B. Full Name (Last, First, Middle Initial) LITTLE CEASARS		Transaction ID : H4.10919	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 1250 41ST			Allocated Activity or Event Year-To-Date 28672.79		
City MOLINE	State IL	Zip Code 61265	Date 03 / 16 / 2015		
Purpose of Disbursement: STERLING REIMBURSEMENT: MEETING EXPENSE: MEALS		Category/ Type	Date		
Activity or Event Identifier: Administrative [MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.92			6.98		10.90

C. Full Name (Last, First, Middle Initial) WAL-MART		Transaction ID : H4.10921	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 2080 N ST ROUTE 50			Allocated Activity or Event Year-To-Date 28672.79		
City BOURBONNAIS	State IL	Zip Code 60914	Date 03 / 16 / 2015		
Purpose of Disbursement: STERLING REIMBURSEMENT: OFFICE SUPPLIES		Category/ Type	Date		
Activity or Event Identifier: Administrative [MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.73			13.74		21.47

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

A. Full Name (Last, First, Middle Initial) STAPLES		Transaction ID : H4.10922	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 111 N. WABASH AVENUE			Allocated Activity or Event Year-To-Date 28672.79	
City CHICAGO	State IL	Zip Code 60602	Date 03 / 16 / 2015	
Purpose of Disbursement: STERLING REIMBURSEMENT: OFFICE SUPPLIES		Category/ Type	Date 03 / 16 / 2015	
Activity or Event Identifier: Administrative [MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
13.68			24.31	37.99

B. Full Name (Last, First, Middle Initial) HY-VEE		Transaction ID : H4.10923	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 4218 AVENUE OF THE CITIES			Allocated Activity or Event Year-To-Date 28672.79	
City MOLINE	State IL	Zip Code 61265	Date 03 / 16 / 2015	
Purpose of Disbursement: STERLING REIMBURSEMENT: MEETING EXPENSE: MEALS		Category/ Type	Date 03 / 16 / 2015	
Activity or Event Identifier: Administrative [MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
29.08			51.71	80.79

C. Full Name (Last, First, Middle Initial) PAPA JOHNS		Transaction ID : H4.10925	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 602 E GRAND AVE			Allocated Activity or Event Year-To-Date 28672.79	
City CARBONDDALE	State IL	Zip Code 62901	Date 03 / 16 / 2015	
Purpose of Disbursement: STERLING REIMBURSEMENT: MEETING EXPENSE: MEALS		Category/ Type	Date 03 / 16 / 2015	
Activity or Event Identifier: Administrative [MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
107.24			190.64	297.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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: DUNKIN' DONUTS. Transaction ID: H4.10926. Allocated Activity or Event: Administrative. Purpose of Disbursement: STERLING REIMBURSEMENT: MEETING EXPENSE: MEALS. Date: 03/16/2015. Total Amount: 56.60.

Form B: SUBWAY. Transaction ID: H4.10927. Allocated Activity or Event: Administrative. Purpose of Disbursement: STERLING REIMBURSEMENT: MEETING EXPENSE: MEALS. Date: 03/16/2015. Total Amount: 60.55.

Form C: UPS. Transaction ID: H4.10929. Allocated Activity or Event: Administrative. Purpose of Disbursement: STERLING REIMBURSEMENT: POSTAGE. Date: 03/16/2015. Total Amount: 97.78.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

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: SOUTH SIDE IRISH STREET PARADE. Transaction ID: H4.10895. Mailing Address: 3400 W 111TH ST, CHICAGO, IL 60655. Purpose: EVENT REGISTRATION FEE. Allocated Activity: Administrative. Date: 03/17/2015. Total Amount: 1000.00.

Form B: FEDEX. Transaction ID: H4.10930. Mailing Address: 942 S. SHADY GROVE ROAD, MEMPHIS, TN 38119. Purpose: DELIVERY SERVICES. Allocated Activity: Administrative. Date: 03/17/2015. Total Amount: 262.09.

Form C: GODADDY.COM. Transaction ID: H4.10893. Mailing Address: 14455 N HAYDEN RD, SUITE 226, SCOTTSDALE, AZ 85260. Purpose: WEB HOSTING. Allocated Activity: Administrative. Date: 03/18/2015. Total Amount: 24.98.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (463.34), NONFEDERAL SHARE (823.73), TOTAL AMOUNT (1287.07).

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

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

Form A: GODADDY.COM, Transaction ID: H4.10889. Allocated Activity or Event: Administrative. Purpose of Disbursement: WEB HOSTING. Date: 03/23/2015. Total Amount: 13.17.

Form B: THORNTONS, Transaction ID: H4.10890. Allocated Activity or Event: Administrative. Purpose of Disbursement: TRAVEL: FUEL. Date: 03/23/2015. Total Amount: 21.56.

Form C: WEST BEND MUTUAL INSURANCE, Transaction ID: H4.10891. Allocated Activity or Event: Administrative. Purpose of Disbursement: INSURANCE: GENERAL LIABILITY. Date: 03/23/2015. Total Amount: 475.09.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 183.53, 326.29, 509.82.

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

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY

A. Full Name (Last, First, Middle Initial) BUFFALO WILD WINGS		Transaction ID : H4.10880	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 1023 BROOKFOREST DR			Allocated Activity or Event Year-To-Date 30608.05	
City SHOREWOOD	State IL	Zip Code 60404	Date MM / DD / YYYY 03 / 31 / 2015	
Purpose of Disbursement: MEETING EXPENSE: MEALS		Category/ Type	Date	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
49.81			88.56	
		=	TOTAL AMOUNT	
			138.37	

B. Full Name (Last, First, Middle Initial) KENNEDY CHIGLO		Transaction ID : H4.10882	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 2211 N BISSELL APT 3			Allocated Activity or Event Year-To-Date 31193.63	
City CHICAGO	State IL	Zip Code 60614	Date MM / DD / YYYY 03 / 31 / 2015	
Purpose of Disbursement: PAYROLL < 25% FED		Category/ Type	Date	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
210.81			374.77	
		=	TOTAL AMOUNT	
			585.58	

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	Date MM / DD / YYYY	
Purpose of Disbursement:		Category/ Type	Date	
Activity or Event Identifier:				
FEDERAL SHARE		+	NONFEDERAL SHARE	
		=	TOTAL AMOUNT	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
260.62		463.33		723.95

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
1597.63		2840.30		4437.93