

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
ERIKA FOR CONGRESS

ADDRESS (number and street) PO BOX 368
 Check if different than previously reported. (ACC) URBANA IL 61803

2. **FEC IDENTIFICATION NUMBER** C C00545822 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) IL 13

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 05 / 31 / 2013 through M M / D D / Y Y Y Y 06 / 30 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer D SCOTT REICHARD

Signature of Treasurer D SCOTT REICHARD [Electronically Filed] Date M M / D D / Y Y Y Y 07 / 15 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

ERIKA FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 31 / 2013 To: M M / D D / Y Y Y Y 06 / 30 / 2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	78285.22	78285.22
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	78285.22	78285.22
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	16023.37	16023.37
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16023.37	16023.37
8. Cash on Hand at Close of Reporting Period (from Line 27).....	62261.85	
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).....	2000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

ERIKA FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	71550.00	71550.00
(ii) Unitemized.....	5465.13	5465.13
(iii) TOTAL of contributions from individuals ▶	77015.13	77015.13
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	1270.09	1270.09
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	78285.22	78285.22
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	78285.22	78285.22

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16023.37	16023.37
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	16023.37	16023.37

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	78285.22
25. SUBTOTAL (add Line 23 and Line 24).....	78285.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16023.37
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	62261.85

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PHIL BLOOMER

Mailing Address 2425A COUNTY ROAD 1225N

City ST. JOSEPH State IL Zip Code 61873

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 27 / 2013

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period
 500.00

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

Mailing Address 12929 LONG RIDGE RD

City KNOXVILLE State TN Zip Code 37934

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

Name of Employer FARRAGUT ENT AND ALLERGY Occupation RN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 22 / 2013

Transaction ID : SA11AI.4147

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 12929 LONG RIDGE ROAD

City KNOXVILLE State TN Zip Code 37934

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

Name of Employer FARRAGUT ENT AND ALLERGY Occupation MD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 22 / 2013

Transaction ID : SA11AI.4149

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REGINALD BROWN

Mailing Address 317 MANSION DR

City State Zip Code
ALEXANDIRA VA 22302

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

Name of Employer Occupation
WILMERHALE LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2013

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period
1000.00

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

Mailing Address 100 CENTRAL AVE

City State Zip Code
SARASOTA FL 34236

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

Name of Employer Occupation
XL INSURANCE INSURANCE UNDERWRITER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2013

Transaction ID : SA11AI.4105

Amount of Each Receipt this Period
250.00

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

Mailing Address 15 RIVER VALLEY RANCH

City State Zip Code
WHITE HEATH IL 61884

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

Name of Employer Occupation
RETIRE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2013

Transaction ID : SA11AI.4131

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARY CAPEL

Mailing Address **8 GREENCROFT DR**

City **CHAMPAIGN** State **IL** Zip Code **61821**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 27 / 2013

Transaction ID : SA11AI.4133

Amount of Each Receipt this Period
500.00

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

Mailing Address **132R W CHURCH ST**

City **CHAMPAIGN** State **IL** Zip Code **61820-3510**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 27 / 2013

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period
500.00

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

Mailing Address **1323 S FEDERAL ST**

City **CHICAGO** State **IL** Zip Code **60605-2716**

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

Name of Employer **BURKE WARREN** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
06 / 24 / 2013

Transaction ID : SA11AI.4151

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 29
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEPHEN CARLSON

Mailing Address 1323 S FEDERAL

City State Zip Code
CHICAGO IL 60605

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

Name of Employer Occupation
SIDLEY AUSTIN LLP ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 18 / 2013

Transaction ID : SA11AI.4180

Amount of Each Receipt this Period
2600.00

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

Mailing Address 1250 S INDIANA

City State Zip Code
CHICAGO IL 60605

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

Name of Employer Occupation
BARNES & THORNBURG LLP ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 10 / 2013

Transaction ID : SA11AI.4174

Amount of Each Receipt this Period
2600.00

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

Mailing Address 333 SE 2ND AVE

City State Zip Code
MIAMI FL 33131

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

Name of Employer Occupation
GREENBERG TRAURIG CO-MANAGING SHAREHOLDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 21 / 2013

Transaction ID : SA11AI.4115

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALEXANDRA DOMERCANT

Mailing Address 2835 N LAKEWOOD AVE

City CHICAGO State IL Zip Code 60657

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

Name of Employer Occupation
HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 15 / 2013

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 1401 RIVER OAKS DR

City MAHOMET State IL Zip Code 61853

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

Name of Employer Occupation
FIRST BUSEY CORPORATION FINANCIAL SERVICES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2013

Transaction ID : SA11AI.4196

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 1616A LAKESIDE DR

City CHAMPAIGN State IL Zip Code 61821

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

Name of Employer Occupation
RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2013

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES GEOLY

Mailing Address 800 ASHLAND AVE

City State Zip Code
WILMETTE IL 60091

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

Name of Employer Occupation
BURKE WARREN MACKAY & SERRITEL ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2013

Transaction ID : SA11AI.4125

Amount of Each Receipt this Period
500.00

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

Mailing Address 115 E HOLMES ST

City State Zip Code
URBANA IL 61801

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

Name of Employer Occupation
SELF-EMPLOYED DISNETWORK RETAILER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 15 / 2013

Transaction ID : SA11AI.4294

Amount of Each Receipt this Period
5.00

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

Mailing Address 115 E HOLMES ST

City State Zip Code
URBANA IL 61801

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

Name of Employer Occupation
SELF-EMPLOYED DISNETWORK RETAILER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2013

Transaction ID : SA11AI.4170

Amount of Each Receipt this Period
2595.00

SUBTOTAL of Receipts This Page (optional).....

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL HENNEMAN

Mailing Address 1605 S STATE

City CHAMPAIGN State IL Zip Code 61820

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

Name of Employer HENNEMAN ENGINEERING Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 22 / 2013

Transaction ID : SA11AI.4186

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 2123 SEATON CT

City CHAMPAIGN State IL Zip Code 61821

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

Name of Employer MAYER CAPEL Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2013

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period
 250.00

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

Mailing Address 104 KARADAN DR

City MAHOMET State IL Zip Code 61853

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

Name of Employer Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2013

Transaction ID : SA11AI.4111

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOBBI KHACHATURIAN

Mailing Address 1111 ENGINEERS RD

City State Zip Code
BELLE CHASSE LA 70037

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

Name of Employer Occupation
HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2013

Transaction ID : SA11AI.4204

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 1111 ENGINEERS ROAD

City State Zip Code
BELLE CHASSE LA 70037

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

Name of Employer Occupation
VERSABAR INC PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2013

Transaction ID : SA11AI.4202

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 3101 GLENHILL DRIVE

City State Zip Code
CHAMPAIGN IL 61821

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

Name of Employer Occupation
CHAMPAIGN ASPHALT COMPANY PRESIDENT AND CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 19 / 2013

Transaction ID : SA11AI.4168

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....

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

7700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PETER MAHON Jr.

Mailing Address 5501 HIGHWOOD DR W

City EDNA State MN Zip Code 55436-1226

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

Name of Employer SELF Occupation ANALYST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : SA11AI.4200

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 301 N NEIL ST

City CHAMPAIGN State IL Zip Code 61820

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

Name of Employer UNIVERSITY OF ILLINOIS Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2013

Transaction ID : SA11AI.4162

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 330 N WABASH

City CHICAGO State IL Zip Code 60611

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

Name of Employer BURKE WARREN Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 24 / 2013

Transaction ID : SA11AI.4121

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

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

3850.00

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

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

FOR LINE NUMBER: PAGE 14 OF 29
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHRIS MEYER

Mailing Address 100 W UNIVERSITY AVE

City State Zip Code
CHAMPAIGN IL 61820

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

Name of Employer Occupation
SELF-EMPLOYED BUSINESS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 25 / 2013

Transaction ID : SA11AI.4188

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
A. MARK NEUMAN

Mailing Address 2507 CHERRY HILLS DR

City State Zip Code
CHAMPAIGN IL 61822

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

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 18 / 2013

Transaction ID : SA11AI.4166

Amount of Each Receipt this Period
 2000.00

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

Mailing Address PO BOX 10156

City State Zip Code
NEWPORT BEACH CA 92658

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

Name of Employer Occupation
SELF HOMEMAKER/PHILANTHROPIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 27 / 2013

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....

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

7200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PETER OCHS

Mailing Address **PO BOX 10156**

City **NEWPORT BEACH** State **CA** Zip Code **92658**

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

Name of Employer **FNE** Occupation **BUSINESSMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 20 / 2013

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
J. ROGER POWELL

Mailing Address **10 GREENCROFT DR**

City **CHAMPAIGN** State **IL** Zip Code **61821**

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

Name of Employer Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 27 / 2013

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period
300.00

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

Mailing Address **1320 N VEITCH ST**

City **ARLINGTON** State **VA** Zip Code **22201**

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

Name of Employer **US PATENT & TRADEMARK OFFICE** Occupation **PATENT EXAMINER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2013

Transaction ID : SA11AI.4137

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

3400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANASTASIA RANDLE

Mailing Address 1775 W ALTGELD ST

City State Zip Code
CHICAGO IL 60614

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

Name of Employer Occupation
STAY AT HOME MOTHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2013

Transaction ID : SA11AI.4164

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
D SCOTT REICHARD

Mailing Address 107 MEADOW DR

City State Zip Code
URBANA IL 61801

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

Name of Employer Occupation
BPC CHAIRMAN/CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2013

Transaction ID : SA11AI.4103

Amount of Each Receipt this Period
2600.00

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

Mailing Address 107 MEADOW DR

City State Zip Code
URBANA IL 61801

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

Name of Employer Occupation
BPC MARKETING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2013

Transaction ID : SA11AI.4190

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

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

6700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JEANNE ROBERTS

Mailing Address 5025 LINDELL BLVD

City ST. LOUIS State MO Zip Code 63108

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

Name of Employer Occupation
DOMESTIC ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2013

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period
 250.00

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

Mailing Address 6643 N TOWER CIRCLE DR

City LINCOLNWOOD State IL Zip Code 60712-3217

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

Name of Employer Occupation
BURKE WARREN MACKAY & SERRITEL ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2013

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1102 W ARMORY AVE

City CHAMPAIGN State IL Zip Code 61821

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

Name of Employer Occupation
MEYER CAPEL ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2013

Transaction ID : SA11AI.4172

Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....

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

3850.00

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

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

FOR LINE NUMBER: PAGE 18 OF 29
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWIN SIMCOX

Mailing Address 4259 S SHELBY ST

City State Zip Code
INDIANAPOLIS IN 46227

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 21 / 2013

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period
500.00

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

Mailing Address PO BOX 660827

City State Zip Code
BIRMINGHAM AL 35266

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

Name of Employer Occupation
SELF-EMPLOYER NEUROSURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 27 / 2013

Transaction ID : SA11AI.4139

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DONNA TANNER-HAROLD

Mailing Address 115 E HOLMES ST

City State Zip Code
URBANA IL 61801

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

Name of Employer Occupation
PARKLAND COLLEGE COUNSELOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2013

Transaction ID : SA11AI.4198

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PHILIPPE VALLERAND

Mailing Address 20718 121ST SE

City SNOHOMISH State WA Zip Code 98296

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

Name of Employer PGV LLC Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2013

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
LINDA VAN DER AA

Mailing Address 506 W MAPLE ST

City HINSDALE State IL Zip Code 60521

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

Name of Employer Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 15 / 2013

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
TERRY VAN DER AA

Mailing Address 506 W MAPLE ST

City HINSDALE State IL Zip Code 60521

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

Name of Employer TLV HOLDINGS Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 15 / 2013

Transaction ID : SA11AI.4184

Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....

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

6200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 29
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JEFFREY WAMPLER

Mailing Address **6 GREENCROFT**

City **CHAMPAIGN** State **IL** Zip Code **61821**

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

Name of Employer **ERWIN MARTINKUS & COLE** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 18 / 2013

Transaction ID : SA11AI.4192

Amount of Each Receipt this Period
2600.00

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

Mailing Address **4151 GULF SHORE BLVD N**

City **NAPLES** State **FL** Zip Code **34103**

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

Name of Employer Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 28 / 2013

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period
800.00

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

Mailing Address **4151 GULF SHORE BLVD N**

City **NAPLES** State **FL** Zip Code **34103**

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

Name of Employer **PRAIRIE GARDENS** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 28 / 2013

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period
800.00

SUBTOTAL of Receipts This Page (optional).....

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

4200.00

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

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

FOR LINE NUMBER: PAGE 21 OF 29
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PAUL WATKINS

Mailing Address 15850 N THOMPSON PEAK PKWY

City State Zip Code
SCOTTSDALE AZ 85260

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

Name of Employer Occupation
ALLIANCE DEFENDING FREEDOM ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 05 / 2013

Transaction ID : SA11AI.4101

Amount of Each Receipt this Period
250.00

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

Mailing Address 1992 MILLY BRANCH RD

City State Zip Code
PIKE ROAD AL 36064

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

Name of Employer Occupation
WILKERSON & BRYAN PC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1441 RHODE ISLAND AVE NW

City State Zip Code
WASHINGTON DC 20005

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

Name of Employer Occupation
COVINGTON & BURLING LLP ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 06 / 2013

Transaction ID : SA11AI.4109

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

71550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 29
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

Full Name (Last, First, Middle Initial) ERIKA HAROLD		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2013	
Mailing Address 115 E HOLMES		Transaction ID : SA11D.4207	
City URBANA State IL Zip Code 61801	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C H4IL13191	Name of Employer Occupation MEYER CAPEL LAWYER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) ERIKA HAROLD		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 05 / 2013	
Mailing Address 115 E HOLMES		Transaction ID : SA11D.4506	
City URBANA State IL Zip Code 61801	Amount of Each Receipt this Period _____ 84.70		
FEC ID number of contributing federal political committee. C H4IL13191	Name of Employer Occupation MEYER CAPEL LAWYER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 674.90		
In-kind - Paid to Quality Inn--lodging for candidate during campaign visit to Montqomerv County			

Full Name (Last, First, Middle Initial) ERIKA HAROLD		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 05 / 2013	
Mailing Address 115 E HOLMES		Transaction ID : SA11D.4507	
City URBANA State IL Zip Code 61801	Amount of Each Receipt this Period _____ 90.20		
FEC ID number of contributing federal political committee. C H4IL13191	Name of Employer Occupation MEYER CAPEL LAWYER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 590.20		
In-kind - Paid to Quality Inn--lodging for campaign volunteer durina campaign visit to Montqomerv Co.			

SUBTOTAL of Receipts This Page (optional).....	_____ 674.90
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 29
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERIKA HAROLD

Mailing Address 115 E HOLMES

City URBANA State IL Zip Code 61801

FEC ID number of contributing federal political committee. **C H4IL13191**

Name of Employer MEYER CAPEL Occupation LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **838.30**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2013

Transaction ID : SA11D.4510

Amount of Each Receipt this Period
 81.70

In-kind - Paid Comfort Inn for Lodging for candidate during campaign visit to Madison County

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

Mailing Address 115 E HOLMES

City URBANA State IL Zip Code 61801

FEC ID number of contributing federal political committee. **C H4IL13191**

Name of Employer MEYER CAPEL Occupation LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **756.60**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2013

Transaction ID : SA11D.4511

Amount of Each Receipt this Period
 81.70

In-kind - Paid Comfort Inn-Lodging for campaign volunteer during campaign visit to Madison County

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

Mailing Address 115 E HOLMES

City URBANA State IL Zip Code 61801

FEC ID number of contributing federal political committee. **C H4IL13191**

Name of Employer MEYER CAPEL Occupation LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1270.09**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : SA11D.4512

Amount of Each Receipt this Period
 431.79

In-kind - Payment to Weiskamp Screen Printing for Campaign T-Shirts

SUBTOTAL of Receipts This Page (optional).....

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

595.19

1270.09

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ERIKA HAROLD		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2013
Mailing Address 115 E HOLMES		Amount of Each Disbursement this Period 90.20 Transaction ID : SB17.4508
City URBANA State IL Zip Code 61801	Purpose of Disbursement In-kind - Paid to Quality Inn-lodging for campaign volunteer during campaign visit to Montgomery Co. Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 002
State: IL District: 13		

Full Name (Last, First, Middle Initial) B. ERIKA HAROLD		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2013
Mailing Address 115 E HOLMES		Amount of Each Disbursement this Period 84.70 Transaction ID : SB17.4509
City URBANA State IL Zip Code 61801	Purpose of Disbursement In-kind - Paid to Quality Inn-lodging for candidate during campaign visit to Montgomery County Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 002
State: IL District: 13		

Full Name (Last, First, Middle Initial) C. ERIKA HAROLD		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2013
Mailing Address 115 E HOLMES		Amount of Each Disbursement this Period 81.70 Transaction ID : SB17.4514
City URBANA State IL Zip Code 61801	Purpose of Disbursement In-kind - Paid Comfort Inn-Lodging for campaign volunteer during campaign visit to Madison County Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 002
State: IL District: 13		

SUBTOTAL of Disbursements This Page (optional).....	256.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ERIKA HAROLD		Date of Disbursement MM / DD / YYYY 06 / 06 / 2013
Mailing Address 115 E HOLMES		Amount of Each Disbursement this Period 81.70 Transaction ID : SB17.4515
City URBANA State IL Zip Code 61801	Purpose of Disbursement In-kind - Paid Comfort Inn for Lodging for candidate during campaign visit to Madison County Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 002

Full Name (Last, First, Middle Initial) B. ERIKA HAROLD		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 115 E HOLMES		Amount of Each Disbursement this Period 431.79 Transaction ID : SB17.4513
City URBANA State IL Zip Code 61801	Purpose of Disbursement In-kind - Payment to Weiskamp Screen Printing for Campaign T-Shirts Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 006

Full Name (Last, First, Middle Initial) C. JTNET INC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2013
Mailing Address 788 N SUNNYSIDE RD		Amount of Each Disbursement this Period 8095.00 Transaction ID : SB17.4229
City DECATUR State IL Zip Code 62522	Purpose of Disbursement CAMPAIGN WEBSITE DESIGN AND DEVEOPMENT Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type 001

SUBTOTAL of Disbursements This Page (optional).....	8608.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 29			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MINUTEMAN PRESS		Date of Disbursement MM / DD / YYYY 06 / 13 / 2013
Mailing Address 905 S NEIL ST, SUITE B		Amount of Each Disbursement this Period 139.00 Transaction ID : SB17.4224
City CHAMPAIGN State IL Zip Code 61820	Purpose of Disbursement CAMPAIGN BUSINESS CARDS Category/Type 006	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MINUTEMAN PRESS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2013
Mailing Address 905 S NEIL ST, SUITE B		Amount of Each Disbursement this Period 148.25 Transaction ID : SB17.4226
City CHAMPAIGN State IL Zip Code 61820	Purpose of Disbursement CAMPAIGN BANNERS AND CAR MAGNETS FOR PARADES Category/Type 006	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NPC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2013
Mailing Address 5100 INTERCHANGE WAY		Amount of Each Disbursement this Period 1228.45 Transaction ID : SB17.4265
City LOUISVILLE State KY Zip Code 40229	Purpose of Disbursement MERCHANT PAYMENT PROCESSING SERVICE FEES Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1515.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 29	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SAM'S CLUB		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 915 W MARKETVIEW DR		Amount of Each Disbursement this Period 134.11 Transaction ID : SB17.4237
City CHAMPAIGN	State IL	
Zip Code 61820	Purpose of Disbursement CANDY FOR DISTRIBUTION AT PARADES	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SAM'S CLUB		Date of Disbursement MM / DD / YYYY 06 / 29 / 2013
Mailing Address 915 W MARKETVIEW DR		Amount of Each Disbursement this Period 138.29 Transaction ID : SB17.4251
City CHAMPAIGN	State IL	
Zip Code 61820	Purpose of Disbursement CANDY FOR DISTRIBUTION AT PARADES	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SHATTERGLASS STUDIOS		Date of Disbursement MM / DD / YYYY 06 / 29 / 2013
Mailing Address 309 S NEIL ST		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4231
City CHAMPAIGN	State IL	
Zip Code 61820	Purpose of Disbursement CAMPAIGN WEB-VIDEO FILMING AND EDITING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2272.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 29			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ERIKA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MARK SHELDEN		Date of Disbursement MM / DD / YYYY 06 / 30 / 2013
Mailing Address 2908 MYRA RIDGE DR		Amount of Each Disbursement this Period 1667.00 Transaction ID : SB17.4227
City URBANA State IL Zip Code 61802	Purpose of Disbursement CAMPAIGN CONSULTING SERVICES Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WEISKAMP SCREEN PRINTING		Date of Disbursement MM / DD / YYYY 06 / 26 / 2013
Mailing Address 312 S NEIL ST		Amount of Each Disbursement this Period 865.05 Transaction ID : SB17.4233
City CHAMPAIGN State IL Zip Code 61820	Purpose of Disbursement CAMPAIGN T-SHIRTS Category/Type 006	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2532.05
TOTAL This Period (last page this line number only).....	15185.24

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 29 OF 29
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

ERIKA FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CONSERVATIVE CONNECTOR LLC

Mailing Address 435 E MAIN ST SUITE 250

City State Zip Code
 GREENWOOD IN 46143

Nature of Debt (Purpose):
FUNDRAISING

Outstanding Balance Beginning This Period	Transaction ID : SD10.4492	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2000.00	0.00	2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	2000.00
2) TOTALS This Period (last page this line number only)	2000.00
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) ▶	2000.00