

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

FRIENDS OF ALEXANDRA

ADDRESS (number and street)

PO BOX 18071

Check if different than previously reported. (ACC)

CHICAGO

IL

60618

2. FEC IDENTIFICATION NUMBER ▼

C C00540609

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IL

04

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 2013

through

M M /

D D /

Y Y Y Y 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 Marian Mangoubi

Signature of Treasurer Marian Mangoubi

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
FRIENDS OF ALEXANDRA

Report Covering the Period: From: M M / D D / Y Y Y Y
10 / 01 / 2013 To: M M / D D / Y Y Y Y
12 / 31 / 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))....	968.80	968.80
(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)).....	968.80	968.80
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3305.06	3305.06
(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)).....	3305.06	3305.06
8. Cash on Hand at Close of Reporting Period (from Line 27).....	-669.61	
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).....	0.00	

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

FRIENDS OF ALEXANDRA

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).....	250.00	250.00
(ii) Unitemized.....	80.00	80.00
(iii) TOTAL of contributions from individuals ▶	330.00	330.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	638.80	638.80
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	968.80	968.80
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.)	0.50	0.50
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	969.30	969.30

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3305.06	3305.06
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) ►	3305.06	3305.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1666.15
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	969.30
25. SUBTOTAL (add Line 23 and Line 24).....	2635.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3305.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	-669.61

**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 13
	<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)
FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial) A. James Teich		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 08 / 2013
Mailing Address 2940 North Lakewood Avenue #2		Transaction ID : SA11AI.4858
City Chicago	State IL Zip Code 60657	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer James J. Teich & Associates	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) P(2014)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	250.00

**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 13
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial) Alexandra C. Eidenberg		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 05 / 2013
Mailing Address 3419 W. Irving Park Rd.		Transaction ID : SA11D.4903
City Chicago	State IL	
FEC ID number of contributing federal political committee. C H4IL04083		Amount of Each Receipt this Period 27.84
Name of Employer The Insurance People	Occupation Owner	In-kind - Food for Volunteers
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 27.84	

Full Name (Last, First, Middle Initial) Alexandra C. Eidenberg		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 12 / 2013
Mailing Address 3419 W. Irving Park Rd.		Transaction ID : SA11D.4905
City Chicago	State IL	
FEC ID number of contributing federal political committee. C H4IL04083		Amount of Each Receipt this Period 27.84
Name of Employer The Insurance People	Occupation Owner	In-kind - Food for Volunteers
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 55.68	

Full Name (Last, First, Middle Initial) Alexandra C. Eidenberg		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2013
Mailing Address 3419 W. Irving Park Rd.		Transaction ID : SA11D.4907
City Chicago	State IL	
FEC ID number of contributing federal political committee. C H4IL04083		Amount of Each Receipt this Period 27.84
Name of Employer The Insurance People	Occupation Owner	In-kind - Food for Volunteers
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 83.52	

SUBTOTAL of Receipts This Page (optional).....	83.52
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 7 OF 13
	<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)
FRIENDS OF ALEXANDRA

A. Full Name (Last, First, Middle Initial)
Alexandra C. Eidenberg

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
111.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2013

Transaction ID : SA11D.4909

Amount of Each Receipt this Period
27.84

In-kind - Food for Volunteers

B. Full Name (Last, First, Middle Initial)
Alexandra C. Eidenberg

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
139.20

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2013

Transaction ID : SA11D.4911

Amount of Each Receipt this Period
27.84

In-kind - Food for Volunteers

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

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
167.04

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2013

Transaction ID : SA11D.4913

Amount of Each Receipt this Period
27.84

In-kind - Food for Volunteers

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

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

83.52

**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 8 OF 13
	<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)
FRIENDS OF ALEXANDRA

A. Full Name (Last, First, Middle Initial)
Alexandra C. Eidenberg

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
194.88

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2013

Transaction ID : SA11D.4915

Amount of Each Receipt this Period
27.84

In-kind - Food for Volunteers

B. Full Name (Last, First, Middle Initial)
Alexandra C. Eidenberg

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230.88

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : SA11D.4917

Amount of Each Receipt this Period
36.00

In-kind - Parking - Petition Contesting

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

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
268.88

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11D.4919

Amount of Each Receipt this Period
38.00

In-kind - Parking - Petition Contesting

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

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

101.84

**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 13
	<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)
FRIENDS OF ALEXANDRA

A. Full Name (Last, First, Middle Initial)
Alexandra C. Eidenberg

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
306.88

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : SA11D.4921

Amount of Each Receipt this Period
38.00

In-kind - Parking - Petition Contesting

B. Full Name (Last, First, Middle Initial)
Alexandra C. Eidenberg

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
344.88

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11D.4923

Amount of Each Receipt this Period
38.00

In-kind - Parking - Petition Contesting

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

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
382.88

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2013

Transaction ID : SA11D.4925

Amount of Each Receipt this Period
38.00

In-kind - Parking - Petition Contesting

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

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

114.00

**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 13
	<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)
FRIENDS OF ALEXANDRA

A. Full Name (Last, First, Middle Initial)
Alexandra C. Eidenberg

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
451.88

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11D.4894

Amount of Each Receipt this Period
69.00

In-kind - Covered December '13 NationBuilder Costs (Software Licensing)

B. Full Name (Last, First, Middle Initial)
Alexandra C. Eidenberg

Mailing Address 3419 W. Irving Park Rd.

City Chicago State IL Zip Code 60618

FEC ID number of contributing federal political committee. **C H4IL04083**

Name of Employer The Insurance People Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
638.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11D.4899

Amount of Each Receipt this Period
186.92

In-kind - Printing - Petitioning and Marketing Materials

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)

Election Cycle-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).....

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

255.92

638.80

**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 11 OF 13	
	<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)
FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial) A. Alexandra C. Eidenberg		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 3419 W. Irving Park Rd.		Amount of Each Disbursement this Period 36.00
City Chicago State IL Zip Code 60618	Purpose of Disbursement In-kind - Parking - Petition Contesting	
Candidate Name	Category/Type	Transaction ID : SB17.4918
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)		
State: IL District: 04		

Full Name (Last, First, Middle Initial) B. Alexandra C. Eidenberg		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address 3419 W. Irving Park Rd.		Amount of Each Disbursement this Period 38.00
City Chicago State IL Zip Code 60618	Purpose of Disbursement In-kind - Parking - Petition Contesting	
Candidate Name	Category/Type	Transaction ID : SB17.4920
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)		
State: IL District: 04		

Full Name (Last, First, Middle Initial) c. Alexandra C. Eidenberg		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 3419 W. Irving Park Rd.		Amount of Each Disbursement this Period 38.00
City Chicago State IL Zip Code 60618	Purpose of Disbursement In-kind - Parking - Petition Contesting	
Candidate Name	Category/Type	Transaction ID : SB17.4922
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)		
State: IL District: 04		

SUBTOTAL of Disbursements This Page (optional).....	112.00
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 12 OF 13		
	<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)
FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial) A. Alexandra C. Eidenberg		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 3419 W. Irving Park Rd.		Amount of Each Disbursement this Period 38.00 Transaction ID : SB17.4924
City Chicago State IL Zip Code 60618	Purpose of Disbursement In-kind - Parking - Petition Contesting	
Candidate Name	Category/Type	
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)	
State: IL District: 04		

Full Name (Last, First, Middle Initial) B. Alexandra C. Eidenberg		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address 3419 W. Irving Park Rd.		Amount of Each Disbursement this Period 38.00 Transaction ID : SB17.4926
City Chicago State IL Zip Code 60618	Purpose of Disbursement In-kind - Parking - Petition Contesting	
Candidate Name	Category/Type	
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)	
State: IL District: 04		

Full Name (Last, First, Middle Initial) c. Alexandra C. Eidenberg		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 3419 W. Irving Park Rd.		Amount of Each Disbursement this Period 69.00 Transaction ID : SB17.4895
City Chicago State IL Zip Code 60618	Purpose of Disbursement In-kind - Covered December '13 NationBuilder Costs (Software Licensing)	
Candidate Name	Category/Type	
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)	
State: IL District: 04		

SUBTOTAL of Disbursements This Page (optional).....	145.00
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 13 OF 13			
	<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)
FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial) A. Alexandra C. Eidenberg		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 3419 W. Irving Park Rd.		Amount of Each Disbursement this Period 2466.92 Transaction ID : SB17.4900
City Chicago State IL Zip Code 60618	Purpose of Disbursement In-kind - Printing - Petitioning and Marketing Materials	
Candidate Name	Category/Type	
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)	
State: IL District: 04		

Full Name (Last, First, Middle Initial) B. Korey Cotter Heather Richardson LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 20 S. Clark St. Ste 500		Amount of Each Disbursement this Period 1700.00 Transaction ID : SB17.4898
City Chicago State IL Zip Code 60603	Purpose of Disbursement Legal Services - Petition Consulting & Filing Services	
Candidate Name	Category/Type	
Office Sought: <input 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)	
State: District:		

Full Name (Last, First, Middle Initial) C. NGP VAN		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 1101 15th Street, NW Ste 500		Amount of Each Disbursement this Period 580.00 Transaction ID : SB17.4889
City Washington State DC Zip Code 20005	Purpose of Disbursement Software Licensing - Compliance	
Candidate Name	Category/Type	
Office Sought: <input 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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2466.92
TOTAL This Period (last page this line number only).....	2723.92