



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Family-PAC Federal

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	X	Y	Y	Y	2	0	1	0		66.70
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	66.70									
(c) Total Receipts (from Line 19) .....	10325.00	10325.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	10391.70	10391.70								
7. Total Disbursements (from Line 31) .....	4767.59	4767.59								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	5624.11	5624.11								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	5200.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Family-PAC Federal

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	9050.00	9050.00
(ii) Unitemized .....	1275.00	1275.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	10325.00	10325.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	10325.00	10325.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	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	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	10325.00	10325.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	10325.00	10325.00

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	167.59	167.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	167.59	167.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	2500.00	2500.00
24. Independent Expenditure (use Schedule E) .....	2100.00	2100.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4767.59	4767.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4767.59	4767.59

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) .....	10325.00	10325.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10325.00	10325.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	167.59	167.59
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	167.59	167.59

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 11  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Family-PAC Federal

**A.** Full Name (Last, First, Middle Initial)  
Eugene Carter

Mailing Address 21 Park Lane

City State Zip Code  
Park Ridge IL 60068

FEC ID number of contributing federal political committee. C

Name of Employer Park Ridge Community Bank      Occupation Banker

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
02 / 09 / 2010

**Transaction ID:** 1307633093136

Amount of Each Receipt this Period 1000.00

Check

**B.** Full Name (Last, First, Middle Initial)  
Janann Cleveland

Mailing Address 9 Victoria Lane

City State Zip Code  
Lincolnshire IL 60069

FEC ID number of contributing federal political committee. C

Name of Employer none      Occupation housewife

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y  
03 / 18 / 2010

**Transaction ID:** 1307633251042

Amount of Each Receipt this Period 200.00

Check

**C.** Full Name (Last, First, Middle Initial)  
Amory Cummings

Mailing Address 1701 N. Halsted

City State Zip Code  
Chicago IL 60614

FEC ID number of contributing federal political committee. C

Name of Employer Freeborn & Peters      Occupation Attorney

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
02 / 16 / 2010

**Transaction ID:** 1307633390714

Amount of Each Receipt this Period 250.00

Check

**SUBTOTAL** of Receipts This Page (optional) ..... 1450.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 11  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Family-PAC Federal

**A.** Full Name (Last, First, Middle Initial)  
Mrs Demetra DeMonte

Mailing Address 1931 St. Clair Dr.

City Pekin State IL Zip Code 61554

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

Name of Employer DeMonte Dental Associates Occupation Office manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 08 / 2010  
Transaction ID: 1307633654042  
Amount of Each Receipt this Period 500.00  
Check

**B.** Full Name (Last, First, Middle Initial)  
James Ehret

Mailing Address 999 N. Green Bay Road

City Lake Forest State IL Zip Code 60045

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 22 / 2010  
Transaction ID: 1307633984433  
Amount of Each Receipt this Period 100.00  
Check

**C.** Full Name (Last, First, Middle Initial)  
Virginia McCaskey

Mailing Address 252 Cornell Ave.

City Des Plaines State IL Zip Code 60016

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

Name of Employer Chicago Bears, Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 23 / 2010  
Transaction ID: 1307634210886  
Amount of Each Receipt this Period 1000.00  
Check

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Family-PAC Federal

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr John McEnroe	Date of Receipt MM / DD / YYYY 01 / 11 / 2010
	Mailing Address 222 N. LaSalle St. Ste. 2600	<b>Transaction ID:</b> 1307634388636
	City State Zip Code Chicago IL 60601	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Check
	Name of Employer Occupation Vedder Price Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Pate Philip	Date of Receipt MM / DD / YYYY 02 / 27 / 2010
	Mailing Address 321 S. Dominion Dr.	<b>Transaction ID:</b> 1307634643730
	City State Zip Code Wood Dale IL 60191	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Check
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Hon. Harry Ramey	Date of Receipt MM / DD / YYYY 02 / 20 / 2010
	Mailing Address 935 Glenlake	<b>Transaction ID:</b> 1307634803495
	City State Zip Code Carol Stream IL 60188	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Check
	Name of Employer Occupation Sales executive P.S. Advertising	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	9050.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Family-PAC Federal

A.	Full Name (Last, First, Middle Initial) RANDY HULTGREN	Transaction ID: 1307635877714
	Mailing Address 233 N 5th Street	Date of Disbursement MM / DD / YYYY 01 / 18 / 2010
	City Springfield State IL Zip Code 62701	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement PAC Contributions	011 Category/ Type
	Candidate Name RANDY HULTGREN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) SCOTT BROWN FOR US SENATE COMMITTEE	Transaction ID: 1307636664761
	Mailing Address PO BOX 395	Date of Disbursement MM / DD / YYYY 01 / 17 / 2010
	City WRENTHAM State MA Zip Code 02093	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement PAC Contributions	011 Category/ Type
	Candidate Name Scott Brown	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2500.00

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

2500.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 10 / 11
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Family-PAC Federal

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Paul Caprio and Associates	Nature of Debt (Purpose): Luncheon Expense
Mailing Address 414 N Orleans Plaza #312	
City State ZIP Code Chicago IL 60610	

Outstanding Balance Beginning This Period 3500.00	<b>Transaction ID: 1307636968949</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3500.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Paul Caprio and Associates	Nature of Debt (Purpose): Luncheon Expense
Mailing Address 414 N Orleans Plaza #312	
City State ZIP Code Chicago IL 60610	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: 1307637137902</b>	
Amount Incurred This Period 1700.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1700.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	5200.00
2) <b>TOTALS</b> This Period (last page this line number only).....	5200.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	5200.00

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Family-PAC Federal		FEC IDENTIFICATION NUMBER <b>C</b> C00362178	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 1 0	
Full Name (Last, First, Middle, Initial) of Payee RANDY HULTGREN		Amount 2100.00	
Mailing Address 233 N 5th Street		Transaction ID: 1307637412683	
City Springfield	State IL	Zip Code 62701	Office Sought: <input type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>14</u> <input type="checkbox"/> Presidential
Purpose of Expenditure PAC Contributions		Category/ Type	004
Name of Federal Candidate supported or Opposed by expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		2100.00	
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	2100.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	2100.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
D Paul Caprio Signature	Date M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 1 1