

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
ILLINOIS REPUBLICAN PARTY - FEDERAL

ADDRESS (number and street) **PO BOX 78**
Check if different than previously reported. (ACC) **CHICAGO IL 60690-0078**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00005926 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 **POLLASTRINI, LAURA, , ,**

Signature of Treasurer **POLLASTRINI, LAURA, , ,** Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ILLINOIS REPUBLICAN PARTY - FEDERAL

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2024"/>		364723.88
(b) Cash on Hand at Beginning of Reporting Period.....	488708.96	
(c) Total Receipts (from Line 19)	49407.06	859668.36
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	538116.02	1224392.24
7. Total Disbursements (from Line 31).....	2836.69	689137.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	535279.33	535254.33
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	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

ILLINOIS REPUBLICAN PARTY - FEDERAL

Report Covering the Period: From: 05 / 01 / 2024 To: 05 / 31 / 2024

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).....	1420.00	497033.36
(ii) Unitemized	600.00	82068.41
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2020.00	579101.77
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	47387.06	175897.31
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	49407.06	754999.08
12. Transfers From Affiliated/Other Party Committees.....	0.00	104590.95
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	78.33
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	49407.06	859668.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	49407.06	859668.36

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	164.26	56470.97
(ii) Non-Federal Share.....	422.40	145211.12
(b) Other Federal Operating Expenditures	2250.03	292995.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2836.69	494677.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	90000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	14526.56
(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	14526.56
29. Other Disbursements (Including Non-Federal Donations).....	0.00	50.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	89884.01
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	89884.01
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2836.69	689137.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2414.29	543926.79

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	49407.06	754999.08
34. Total Contribution Refunds (from Line 28(d))	0.00	14526.56
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	49407.06	740472.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2414.29	349466.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	78.33
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2414.29	349387.89

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
<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

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

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY - FEDERAL

A. DAVIS, MARTIN, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3605 WITTINGTON CT
 City SPRINGFIELD State IL Zip Code 62704-6708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M. DAVIS MGMT Occupation (for Individual) PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5750.00

Date of Receipt 05 / 25 / 2024
Transaction ID : A0ACB4899DFAF479EA7F
 Amount of Each Receipt this Period 750.00
 Memo Item
 IN-KIND:PROMOTIONAL ITEMS

B. LORTON, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 319 TIMBER RIDGE DR
 City GRAFTON State IL Zip Code 62037-1155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AERIES RESORT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 05 / 25 / 2024
Transaction ID : A6C2296EA26294FB0BB3
 Amount of Each Receipt this Period 230.00
 Memo Item
 IN-KIND:PROMOTIONAL ITEMS

C. ROSENTHAL, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 S MONROE ST
 City MORRISONVILLE State IL Zip Code 62546-6763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 25 / 2024
Transaction ID : A0CE22B1390004B6AA9D
 Amount of Each Receipt this Period 200.00
 Memo Item
 IN-KIND:PROMOTIONAL ITEMS

SUBTOTAL of Receipts This Page (optional).....	1180.00
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 OF 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY - FEDERAL

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, ROGER, , ,

Mailing Address 8767 KLONDIKE ROAD

City WORDEN State IL Zip Code 62097

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2024

Transaction ID : **AE3F9A34E42584DDDA2E**

Amount of Each Receipt this Period
140.00

Memo Item
IN-KIND:PROMOTIONAL ITEMS

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, ROGER, , ,

Mailing Address 8767 KLONDIKE ROAD

City WORDEN State IL Zip Code 62097

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
05 / 25 / 2024

Transaction ID : **A70CEC717F4EF44BBA72**

Amount of Each Receipt this Period
100.00

Memo Item
IN-KIND:PROMOTIONAL ITEMS

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	1420.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY - FEDERAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 1ST ST SE

City WASHINGTON	State DC	Zip Code 20003-1885
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FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
31250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2024

Transaction ID : ADD17214A0C4D473288E

Amount of Each Receipt this Period
3250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LAHOOD FOR CONGRESS

Mailing Address P.O. BOX 10735

City PEORIA	State IL	Zip Code 61612-0735
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00575050

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2024

Transaction ID : A9FD8961FCECB44EAA01

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NRSC VICTORY

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C** C00837518

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
135360.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2024

Transaction ID : A4245A4AFBF1240A28ED

Amount of Each Receipt this Period
39137.06

Memo Item

SUBTOTAL of Receipts This Page (optional).....	47387.06
TOTAL This Period (last page this line number only).....	47387.06

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY - FEDERAL

Full Name (Last, First, Middle Initial)

A. GOOGLE, INC

Mailing Address 1600 AMPHITHEATRE PKWY

City
MOUNTAIN VIEW

State
CA

Zip Code
94043-1351

Purpose of Disbursement
OFFICE SUBSCRIPTION

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : B9541285D75

Amount of Each Disbursement this Period

[REDACTED] 72.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RING CENTRAL

Mailing Address 999 BAKER WAY

City
SAN MATEO

State
CA

Zip Code
94404

Purpose of Disbursement
OFFICE SUBSCRIPTION

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	6			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : BC915F7C961

Amount of Each Disbursement this Period

[REDACTED] 102.33

Memo Item

Full Name (Last, First, Middle Initial)

C. DAVIS, MARTIN, L, ,

Mailing Address 3605 WITTINGTON CT

City
SPRINGFIELD

State
IL

Zip Code
62704-6708

Purpose of Disbursement
IN-KIND:PROMOTIONAL ITEMS

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼ ANNUAL

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	5			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : B0BCB4899E

Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item

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

[REDACTED] 924.33

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

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY - FEDERAL

Full Name (Last, First, Middle Initial)

A. LORTON, JEFF, , ,

Mailing Address 319 TIMBER RIDGE DR

City
GRAFTON

State
IL

Zip Code
62037-1155

Purpose of Disbursement
IN-KIND:PROMOTIONAL ITEMS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼
 ANNUAL

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	2	4

FEC Identification Number

C

Transaction ID : B6C2296EB2

Amount of Each Disbursement this Period

230.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ROSENTHAL, WAYNE, , ,

Mailing Address 209 S MONROE ST

City
MORRISONVILLE

State
IL

Zip Code
62546-6763

Purpose of Disbursement
IN-KIND:PROMOTIONAL ITEMS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼
 ANNUAL

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	2	4

FEC Identification Number

C

Transaction ID : B0CE22B139I

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SMITH, ROGER, , ,

Mailing Address 8767 KLONDIKE ROAD

City
WORDEN

State
IL

Zip Code
62097

Purpose of Disbursement
IN-KIND:PROMOTIONAL ITEMS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼
 ANNUAL

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	2	4

FEC Identification Number

C

Transaction ID : BE3F9B34E4

Amount of Each Disbursement this Period

140.00

Memo Item

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

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

570.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ILLINOIS REPUBLICAN PARTY - FEDERAL

Full Name (Last, First, Middle Initial)

A. SMITH, ROGER, , ,

Mailing Address 8767 KLONDIKE ROAD

City
WORDEN

State
IL

Zip Code
62097

Purpose of Disbursement
IN-KIND:PROMOTIONAL ITEMS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼ ANNUAL

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	2	4

FEC Identification Number

C

Transaction ID : B70CEC717F

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

100.00

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

1594.33

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
ILLINOIS REPUBLICAN PARTY - FEDERAL

A. Full Name (Last, First, Middle Initial) Transaction ID : H667ACFEC237C44I
CAMPAIGN NUCLEUS
Mailing Address 800 BOYLSTON ST. SUITE 1410
City BOSTON State MA Zip Code 02199-2100
Purpose of Disbursement: OFFICE SUBSCRIPTIONS
Activity or Event Identifier: ADMINISTRATIVE
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 201682.09
Date: 05/01/2024
FEDERAL SHARE 164.26 + NONFEDERAL SHARE 422.40 = TOTAL AMOUNT 586.66

B. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement:
Activity or Event Identifier:
Allocated Activity or Event:
Allocated Activity or Event Year-To-Date:
Date:
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement:
Activity or Event Identifier:
Allocated Activity or Event:
Allocated Activity or Event Year-To-Date:
Date:
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 164.26, 422.40, 586.66

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 164.26, 422.40, 586.66