

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

LAHOOD FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 10735

Check if different than previously reported. (ACC)

PEORIA

IL

61612

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00575050

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

IL

18

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 MM / DD / YYYY

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY
01 / 01 / 2019

through

MM / DD / YYYY
03 / 31 / 2019

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 NOBLE, KENT, A, ,

Signature of Treasurer NOBLE, KENT, A, ,

[Electronically Filed]

Date

MM / DD / YYYY
04 / 15 / 2019

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name
LAHOOD FOR CONGRESS

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

	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))....	281676.32	286726.32
(b) Total Contribution Refunds (from Line 20(d))	0.00	1582.68
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	281676.32	285143.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	235329.44	374228.57
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	992.96
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	235329.44	373235.61
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1636883.78	
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 05/2016)

Write or Type Committee Name

LAHOOD 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).....	65292.32	65592.32
(ii) Unitemized.....	16884.00	17634.00
(iii) TOTAL of contributions from individuals ▶	82176.32	83226.32
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	199500.00	203500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	281676.32	286726.32
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	17381.01	26692.46
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	992.96
15. OTHER RECEIPTS (Dividends, Interest, etc.)	270.49	288.73
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	299327.82	314700.47

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	235329.44	374228.57
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	1582.68
(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	1582.68
21. OTHER DISBURSEMENTS	18700.00	20291.99
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	254029.44	396103.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1591585.40
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	299327.82
25. SUBTOTAL (add Line 23 and Line 24).....	1890913.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	254029.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1636883.78

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

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

FOR LINE NUMBER: PAGE 5 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TURNER, MARTIN, , ,
 Mailing Address 9612 CHANDLERVILLE RD
 City BEARDSTOWN State IL Zip Code 62618-7608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2019
Transaction ID : A70E32AB31DA94094A72
 Amount of Each Receipt this Period
 750.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
BEEMAN, RAY, RAY, ,
 Mailing Address 870 ALVERMAR RIDGE DR
 City MC LEAN State VA Zip Code 22102-1435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ERNST & YOUNG LLP Occupation PRINCIPAL
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2019
Transaction ID : A12CD7AED46A24653B85
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
STEIN, SHIMON, , ,
 Mailing Address 2122 MASSACHUSETTS AVE NW, 614
 City WASHINGTON State DC Zip Code 20008-2830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WEST FRONT STRATEGIES, LLC Occupation PRINCIPAL
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2019
Transaction ID : ABA8B92193EBB4F14B2E
 Amount of Each Receipt this Period
 1350.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3100.00
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: PAGE 6 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ASKEW, WHITAKER, , ,
Mailing Address 7614 HOLIDAY DR

City ALEXANDRIA State VA Zip Code 22308-1032

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

Name of Employer SUBJECT MATTER Occupation CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2019

Transaction ID : **A29B6CAD07B9046B3A89**

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ROSSI, ALFRED, N, ,
Mailing Address 107 TREMONT ST

City HOPEDALE State IL Zip Code 61747-7525

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

Name of Employer ALFRED N ROSSI, MDSC Occupation PHYSICIAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : **AF9260CAB9B4A4E36B06**

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AUSTIN, JOHN, , ,
Mailing Address 500 N RHODE ISLAND AVE

City MORTON State IL Zip Code 61550-3031

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

Name of Employer VONACHEN GROUP Occupation CFO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2019

Transaction ID : **A03EED64E47714331BCC**

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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: PAGE 7 OF 100
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMPSON, VERLA, , DDS

Mailing Address 301 NE 3RD AVE

City ALEDO State IL Zip Code 61231-1347

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2019

Transaction ID : **ACED4BDDEF179421C954**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PALOMO, OSWALDO, , ,

Mailing Address 446 STURGES RD

City FAIRFIELD State CT Zip Code 06824-2851

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

Name of Employer CHARTWELL STRATEGY Occupation MANAGING DIRECTOR

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A5900C66E571E460890F**

Amount of Each Receipt this Period
2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MCQUAID, CHARLES, P., ,

Mailing Address 1341 TURVEY ROAD

City DOWNERS GROVE State IL Zip Code 60515-4547

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A4604EEBAC0DE43D3A22**

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3550.00

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: PAGE 8 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VONACHEN, JAY, R, ,

Mailing Address PO BOX 3860

City PEORIA State IL Zip Code 61612-3860

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 4030.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : A2531BEFB29CB41988E0

Amount of Each Receipt this Period
 1270.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SCHWARZMAN, CHRISTINE, , ,

Mailing Address 345 PARK AVE

City NEW YORK State NY Zip Code 10154-0004

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2019

Transaction ID : A2B9C31096A144946A2B

Amount of Each Receipt this Period
 2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
STOMBRES, STEVE, , ,

Mailing Address 10092 DANIELS RUN WAY

City FAIRFAX State VA Zip Code 22030-2448

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

Name of Employer HARBINGER STRATEGIES LLC Occupation PARTNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2019

Transaction ID : A58E4666B2A044BF4853

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5070.00

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: PAGE 9 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAHOOD, KATHLEEN, I, MRS.,
Mailing Address 5612 W GRANDE CIR

City PEORIA State IL Zip Code 61615-2274

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2292.32

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2019

Transaction ID : **A228E4676F29D415DAEF**

Amount of Each Receipt this Period
 2292.32

Memo Item
 IN-KIND:EVENT SUPPLIES

B. Full Name (Last, First, Middle Initial)
URBAN, TIMOTHY, , ,
Mailing Address 19634 HOOVER FARM DR

City GAITHERSBURG State MD Zip Code 20882-1200

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2019

Transaction ID : **ABF55D72AFCD4439FA8F**

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SCHWARZMAN, STEPHEN, , ,
Mailing Address 345 PARK AVE

City NEW YORK State NY Zip Code 10154-0004

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

Name of Employer BLACKSTONE Occupation CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2019

Transaction ID : **A508087E137C44436B1A**

Amount of Each Receipt this Period
 2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6092.32

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: PAGE 10 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GROSS, THOMAS, LESTER, MR.,

Mailing Address 201 S MAIN ST

City WASHINGTON State IL Zip Code 61571-2560

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2019

Transaction ID : A57273A2871C44746855

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MACHETTI, LAURA, L, ,

Mailing Address 220 W LINDY LN

City PEORIA State IL Zip Code 61614-2102

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2019

Transaction ID : A59CA42D139C84C8A8E4

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SCHWARZMAN, STEPHEN, , ,

Mailing Address 345 PARK AVE

City NEW YORK State NY Zip Code 10154-0004

FEC ID number of contributing federal political committee. C

Name of Employer BLACKSTONE Occupation CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2019

Transaction ID : A5C976369D6E14E909E2

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3550.00

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: PAGE 11 OF 100
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STUDDARD, KEITH, , ,

Mailing Address 1628 11TH ST NW 409

City WASHINGTON State DC Zip Code 20001-5382

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

Name of Employer JEFFREY J. KIMBELL & ASSOC. Occupation VICE PRESIDENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2019

Transaction ID : **A7D33838876C6449DBB0**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LEMING, CHRISTOPHER, A, ,

Mailing Address 2728 KIPLING DR

City SPRINGFIELD State IL Zip Code 62711-6234

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

Name of Employer TROXELL INSURANCE Occupation INSURANCE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **AB98628E45CDC4EC5AC3**

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 900 W GRAND OAK DR

City PEORIA State IL Zip Code 61615-1150

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2019

Transaction ID : **A815E0E486DA6481ABD1**

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1800.00

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 12 OF 100	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
IVANCIC, CHARLOTTE, , ,

Mailing Address 1212 NEW YORK AVE NW
STE 1050

City WASHINGTON State DC Zip Code 20005-6135

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

Name of Employer TARPLIN DOWNS AND YOUNG LLC Occupation PARTNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2019

Transaction ID : **A791752F18F7C4179877**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ERICKSON, MARY ALICE, , MS.,

Mailing Address 6901 N GALENA RD
APT 217

City PEORIA State IL Zip Code 61614-3161

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2019

Transaction ID : **A58EA701D6DBE4EC0BDD**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HALL, DIANA, , ,

Mailing Address 451 W DETWEILLER DR

City PEORIA State IL Zip Code 61615-2116

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

Name of Employer BARD OPTICAL Occupation OWNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A9369BAB08E5B4A2B889**

Amount of Each Receipt this Period
250.00

Memo Item

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 13 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEIN, SHIMON, , ,

Mailing Address 2122 MASSACHUSETTS AVE NW, 614

City WASHINGTON State DC Zip Code 20008-2830

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

Name of Employer WEST FRONT STRATEGIES, LLC Occupation PRINCIPAL

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2019

Transaction ID : **A88984A9176114F93868**

Amount of Each Receipt this Period
 _____ 1350.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ALWAN, PATRICK, , ,

Mailing Address 606 W GREENWAY PL

City PEORIA State IL Zip Code 61614-7125

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2019

Transaction ID : **A6E5951AB6D0D464696A**

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

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

Mailing Address 5 TALMONT PL

City LITTLE ROCK State AR Zip Code 72223-9054

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

Name of Employer CAPITOL COUNSEL Occupation PARTNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2019

Transaction ID : **ABF575163A2CD414DABD**

Amount of Each Receipt this Period
 _____ 1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 3350.00

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: PAGE 14 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONIS, PETER, P, ,
 Mailing Address 7610 N EDGEWILD DR
 City PEORIA State IL Zip Code 61614-2118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2019
Transaction ID : A9A63BF9DA801480C960
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
ROSSMAN, EMANUEL, , ,
 Mailing Address 8000 GREENWICH WOODS DR
 City MC LEAN State VA Zip Code 22102-1332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HARBINGER STRATEGIES LLC Occupation PARTNER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2019
Transaction ID : A3C62D86ACFC746DDB5D
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
TRACY, JIL, , ,
 Mailing Address 1628 FIELDSTONE DR
 City QUINCY State IL Zip Code 62305-6699
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STATE OF IL Occupation STATE SENATOR
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019
Transaction ID : A2DD3DBF4C0774FD7BF2
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
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: PAGE 15 OF 100
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

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

Mailing Address 1821 23RD ST NW

City WASHINGTON State DC Zip Code 20008-4030

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

Name of Employer ZIRKELBACH STRATEGIES Occupation CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A5299A66B77394469AFC**

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KUHLMAN, DENETTE, , ,

Mailing Address 709 S 24TH ST

City QUINCY State IL Zip Code 62301-5241

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2019

Transaction ID : **A0179EE7EB84340E9A4E**

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ENDRES, LESTER, , ,

Mailing Address 131 MELODY LANE

City EAST PEORIA State IL Zip Code 61611-1111

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2019

Transaction ID : **AB9BA55E1D73A4D319F2**

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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: PAGE 16 OF 100
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SMITH, TARA, , ,

Mailing Address 10 10TH ST SE APT B

City WASHINGTON State DC Zip Code 20003-3945

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

Name of Employer Occupation
MICHAEL TORREY ASSOC. VICE PRESIDENT FEDERAL AFFAIRS

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : **A243D4129959B4222BAC**

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LEVEY, JEFFREY, , ,

Mailing Address 7408 FAIRFAX RD

City BETHESDA State MD Zip Code 20814-1241

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : **A149C63A058344E179CF**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BRADBURY, ANNE, , ,

Mailing Address 8116 KERRY LN

City CHEVY CHASE State MD Zip Code 20815-4812

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

Name of Employer Occupation
DUBERSTEIN GROUP CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **AD30ED0D36F974F50BE7**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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: PAGE 17 OF 100
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NIEMEYER, GARRY, L., ,

Mailing Address 8370 AUBURN RD

City AUBURN State IL Zip Code 62615-9264

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2019

Transaction ID : **AA3A15775EA364F1FA9B**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BARBAGIOVANNI, STEPHANIE, , ,

Mailing Address 913 COUNTRY CLUB DR E

City QUINCY State IL Zip Code 62301-6187

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 29 / 2019

Transaction ID : **AF70EAEDAF2204BB29A0**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
VONACHEN, JAY, R, ,

Mailing Address PO BOX 3860

City PEORIA State IL Zip Code 61612-3860

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4030.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **AF016ED23B59D4BBE9A5**

Amount of Each Receipt this Period
1230.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2480.00

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 18 OF 100	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRANE, AMY, , ,

Mailing Address **2450 PERSIMMON DRIVE**

City SAINT CHARLES	State IL	Zip Code 60174-5608
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
--	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	19	/	2019

Transaction ID : AD6FCFAB24313460F8EF

Amount of Each Receipt this Period
 0.00 100.00 200.00 300.00 400.00 500.00 600.00 700.00 800.00 900.00 1000.00 2000.00 3000.00 4000.00 5000.00 6000.00 7000.00 8000.00 9000.00 10000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ELDER, TIMOTHY, L, ,

Mailing Address **918 W BRIDGETOWNE CT**

City DUNLAP	State IL	Zip Code 61525-9202
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
---------------------------------	------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	30	/	2019

Transaction ID : AF0200580B20F4528863

Amount of Each Receipt this Period
 0.00 100.00 200.00 300.00 400.00 500.00 600.00 700.00 800.00 900.00 1000.00 2000.00 3000.00 4000.00 5000.00 6000.00 7000.00 8000.00 9000.00 10000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CHADWICK, KIRSTEN, , ,

Mailing Address **601 PRESIDENT FORD LN**

City ALEXANDRIA	State VA	Zip Code 22302-3033
---------------------------	--------------------	-------------------------------

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

Name of Employer FIERCE GOVERNMENT RELATIONS	Occupation CONSULTANT
--	---------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	31	/	2019

Transaction ID : A7C05FD17E0704AB98A0

Amount of Each Receipt this Period
 0.00 100.00 200.00 300.00 400.00 500.00 600.00 700.00 800.00 900.00 1000.00 2000.00 3000.00 4000.00 5000.00 6000.00 7000.00 8000.00 9000.00 10000.00

Memo Item

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

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

0.00 100.00 200.00 300.00 400.00 500.00 600.00 700.00 800.00 900.00 1000.00 2000.00 3000.00 4000.00 5000.00 6000.00 7000.00 8000.00 9000.00 10000.00

Memo Item

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

Use separate schedule(s)
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(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCHELLHAS, ROBERT, , ,

Mailing Address 2639 N ROOSEVELT ST

City ARLINGTON State VA Zip Code 22207-1011

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

Name of Employer ERNST & YOUNG LLP Occupation CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : **A6630B5F283DC4C7A99F**

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SCHWARZMAN, CHRISTINE, , ,

Mailing Address 345 PARK AVE

City NEW YORK State NY Zip Code 10154-0004

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2019

Transaction ID : **AC77C61C6895D4BAA95D**

Amount of Each Receipt this Period
2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FRANCIS, STEPHEN, , ,

Mailing Address 301 TINGEY ST SE
APT 404

City WASHINGTON State DC Zip Code 20003-4617

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

Name of Employer ERNST & YOUNG LLP Occupation PRINCIPAL

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2019

Transaction ID : **A2CE61043DBDA4E82A9E**

Amount of Each Receipt this Period
2800.00

Memo Item

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

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

8300.00

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

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FOR LINE NUMBER: PAGE 20 OF 100
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENTILE, BRADLEY, , ,

Mailing Address 1412 C ST SE

City WASHINGTON State DC Zip Code 20003-2363

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

Name of Employer HILLEAST Occupation CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A23A3DA7BAF194DC4AC0**

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NEVINS, KYLE, , ,

Mailing Address 5060 MACARTHUR BLVD NW

City WASHINGTON State DC Zip Code 20016-3338

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

Name of Employer HARBINGER STRATEGIES LLC Occupation CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 11 / 2019

Transaction ID : **A66A04BA6160E4DA69C4**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KIMBELL, JEFFREY, , ,

Mailing Address 601 13TH ST NW
STE 650

City WASHINGTON State DC Zip Code 20005-3807

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

Name of Employer SELF EMPLOYED Occupation HEALTH CARE CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2019

Transaction ID : **A5BCFD7081A334C1388E**

Amount of Each Receipt this Period
2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4200.00

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: PAGE 21 OF 100
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

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

Mailing Address 1572 N WEST ST

City GALESBURG	State IL	Zip Code 61401-1752
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A4B6CD278FD7743B695D**

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WOOD, ROBERT, , ,

Mailing Address 813 VICAR LN

City ALEXANDRIA	State VA	Zip Code 22302-3420
--------------------	-------------	------------------------

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

Name of Employer BGR GROUP	Occupation CONSULTANT
-------------------------------	--------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **AA078DB15B44845D1AF6**

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CULLEY-FOSTER, TONY, , ,

Mailing Address 110 W MT. IDA AVE

City ALEXANDRIA	State VA	Zip Code 22305-1803
--------------------	-------------	------------------------

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

Name of Employer CFCO INTERNATIONAL	Occupation PRESIDENT
--	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 28 / 2019

Transaction ID : **AE117AF22CD084AC288B**

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3150.00
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: PAGE 22 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEMONTE, ANTHONY, J, DR.,

Mailing Address 1931 SAINT CLAIR DR

City PEKIN State IL Zip Code 61554-6334

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

Name of Employer SELF EMPLOYED Occupation DENTIST

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2019

Transaction ID : **A281F22FAF85A4AE8B5F**

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 16023 RASSI RD

City MACKINAW State IL Zip Code 61755-9062

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

Name of Employer ASSOCIATED ANESTHESIOLOGISTS, SC Occupation PHYSICIAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2019

Transaction ID : **A72D5CE2230C541EDA74**

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CRANE, CHRIS, , ,

Mailing Address 2450 PERSIMMON DR

City SAINT CHARLES State IL Zip Code 60174-5608

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

Name of Employer EXELON Occupation CEO AND PRESIDENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2019

Transaction ID : **AAD2AC905D1134E61B81**

Amount of Each Receipt this Period
 2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3550.00

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: PAGE 23 OF 100
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
OAKLEY, THOMAS, , ,

Mailing Address PO BOX 909

City QUINCY State IL Zip Code 62306-0909

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

Name of Employer QUINCY MEDIA INC Occupation DIRECTOR

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 25 / 2019

Transaction ID : **A0D3BA6B9C3A4424A84A**

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH
NATIONAL ASSOCIATION OF BROADCASTERS PAC

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS PAC (NABPAC)

Mailing Address 1771 N STREET, NW

City WASHINGTON State DC Zip Code 20036-2800

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 25 / 2019

Transaction ID : **AE096922D0B9544C691E**

Amount of Each Receipt this Period
2000.00

Memo Item
CONDUIT MEMO TOTAL
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
OAKLEY, RALPH, , ,

Mailing Address 2824 CARNOUSTIE LN

City QUINCY State IL Zip Code 62301-6176

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

Name of Employer QUINCY MEDIA INC Occupation PRESIDENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 25 / 2019

Transaction ID : **A4BD21064FE8249B0B0B**

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED (NON-DIRECTED) THROUGH
NATIONAL ASSOCIATION OF BROADCASTERS PAC

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: (check only one)		PAGE 24 OF 100	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS PAC (NABPAC)

Mailing Address 1771 N STREET, NW

City WASHINGTON	State DC	Zip Code 20036-2800
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2019

Transaction ID : AF7867A0492874A759C4

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item
CONDUIT MEMO TOTAL
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
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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

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	_____ 0.00
TOTAL This Period (last page this line number only).....▶	_____ 65292.32

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 25 OF 100	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" 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)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TRINITY INDUSTRIES EMPLOYEE POLITICAL ACTION COMMITTEE (SF) INC.

Mailing Address 2525 N. STEMMONS FREEWAY

City DALLAS	State TX	Zip Code 75207
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00268904

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : A6FBD12B1A3B64B68AC3

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
IRON MOUNTAIN INCORPORATED EMPLOYEES PAC

Mailing Address 1 FEDERAL STREET

City BOSTON	State MA	Zip Code 02110
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00523936

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : A4DCD90085DB742DD890

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
EXELON PAC

Mailing Address 101 CONSTITUTION AVE NW

City WASHINGTON	State DC	Zip Code 20001-2133
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FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : A2418CCBC8B6F48979E0

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7000.00
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 26 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PRECISION MACHINED PRODUCTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 6880 W. SNOWVILLE ROAD
SUITE 200

City BRECKSVILLE	State OH	Zip Code 44141
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00110858

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2019

Transaction ID : A217CB74827C540E383B

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address ONE STATE FARM PLAZA
C/O MARK SCHWAMBERGER, TREASURER,

City BLOOMINGTON	State IL	Zip Code 61710
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00544817

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : A982FC03CFF464DF98BF

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ANTHEM, INC. POLITICAL ACTION COMMITTEE (ANTHEM PAC)

Mailing Address 120 MONUMENT CIRCLE

City INDIANAPOLIS	State IN	Zip Code 46204
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : A6CD7082E43FC4D7498A

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	9500.00
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: PAGE 27 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A

Mailing Address 200 PARK AVENUE

City NEW YORK State NY Zip Code 10166

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : **A7D0BFC50E9A14689AC3**

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HEALTH CARE SERVICE CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 300 E. RANDOLPH
 LEGAL DEPARTMENT

City CHICAGO State IL Zip Code 60601

FEC ID number of contributing federal political committee. **C** C00199711

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : **A27D8D6C7D1BB4BB99CB**

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 STATE STREET

City SPRINGFIELD State MA Zip Code 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : **AA93482D5AF904D899D8**

Amount of Each Receipt this Period
 5000.00

Memo Item

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

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

8500.00

**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 28 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Mailing Address 50 F STREET NW
SUITE 900

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002238

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : **A2CF9233E6E534E6FADE**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

Mailing Address 101 CONSTIUTION AVENUE, NW
10TH FLOOR WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2019

Transaction ID : **AC37BF92C2B62407A825**

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS PAC (NABPAC)

Mailing Address 1771 N STREET, NW

City WASHINGTON State DC Zip Code 20036-2800

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **ABFD202EEEE03473B832**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7000.00
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 29 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ILLINOIS CORN GROWERS ASSN POLITICAL INVOLVEMENT FUND-FEDERAL

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2019

Transaction ID : **AE2B63B32CC08430C9D9**

Mailing Address P.O. BOX 1623
City BLOOMINGTON State IL Zip Code 61702-1623

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. **C** C00376590

Name of Employer Occupation

Memo Item

Receipt For: 2020
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

B. Full Name (Last, First, Middle Initial)
CVS HEALTH PAC

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A99C79AF763DA4DF39D1**

Mailing Address 1275 PENNSYLVANIA AVENUE, NW SUITE 700
City WASHINGTON State DC Zip Code 20004

Amount of Each Receipt this Period
5000.00

FEC ID number of contributing federal political committee. **C** C00384818

Name of Employer Occupation

Memo Item

Receipt For: 2020
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
5000.00

C. Full Name (Last, First, Middle Initial)
MEDICAL DEVICE MANUFACTURERS ASSOCIATION PAC

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A7F8DC114E18D40979A9**

Mailing Address P.O. BOX 34591
City WASHINGTON State DC Zip Code 20043

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. **C** C00484162

Name of Employer Occupation

Memo Item

Receipt For: 2020
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

7000.00

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

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 30 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 711 HIGH STREET
GOVERNMENT RELATIONS

City DES MOINES State IA Zip Code 50392

FEC ID number of contributing federal political committee. **C** C00128918

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A0FABEE8FE7ED4FAF933**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC POLITICAL ACTION COMMITTEE

Mailing Address 1299 PENNSYLVANIA AVE, NW
STE 900

City WASHINGTON State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A5008F03DE1654011AE4**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)

Mailing Address 539 S. MAIN STREET

City FINDLAY State OH Zip Code 45840

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **AF5961668D30C4E629E6**

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7000.00
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 31 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION PAC

Mailing Address 3 BETHESDA METRO CENTER SUITE #110

City BETHESDA	State MD	Zip Code 20814-6302
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : A0CC276D6771D4D28934

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ABBVIE POLITICAL ACTION COMMITTEE

Mailing Address 1 N. WAUKEGAN RD

City NORTH CHICAGO	State IL	Zip Code 60064-1802
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FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2019

Transaction ID : A90FD31B69E3D49899DA

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FMC CORPORATION GOOD GOVERNMENT PROGRAM

Mailing Address 1600 WILSON BLVD, STE 700

City ARLINGTON	State VA	Zip Code 22209-2510
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FEC ID number of contributing federal political committee. **C** C00033704

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2019

Transaction ID : ADC3DED3F3ACA4B8D8AF

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	15000.00
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 32 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RAYTHEON PAC

Mailing Address 1100 WILSON BLVD, SUITE 1500

City ARLINGTON	State VA	Zip Code 22209-3900
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FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2019

Transaction ID : A19C6A830ED2C4CA5B72

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WALGREEN CO PAC

Mailing Address 104 WILMOT ROAD
MS #1459

City DEERFIELD	State IL	Zip Code 60015
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00160770

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2019

Transaction ID : AF465DB2DF998413BA45

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA, INC POLITICAL ACTION COMMITTEE (TOYOTA/LEXUS PAC)

Mailing Address 325 7TH STREET, NW, SUITE 1000

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00542365

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : A5CF1373B6E5A4EB79F5

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
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: PAGE 33 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2019

Transaction ID : **AD92E4AC6799B4DFEA99**

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NAT'L GRAIN & FEED ASSOCIATION'S FUND FOR BETTER GOV'T COMMITTEE (GRAIN & FEED PAC)

Mailing Address 1250 EYE STREET SUITE 1003

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00240226

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2019

Transaction ID : **A124AB913742A4B9AB4B**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CASE NEW HOLLAND INDUSTRIAL INC. EXCELLENCE IN GOVERNMENT FUND

Mailing Address 1001 G ST NW
STE 100E

City WASHINGTON State DC Zip Code 20001-4545

FEC ID number of contributing federal political committee. **C** C00303883

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : **AB1C046946AD6429E92A**

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 8500.00

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 34 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MOLINA HEALTHCARE, INC. PAC

Mailing Address 200 OCEANGATE
SUITE 100

City LONG BEACH State CA Zip Code 90802

FEC ID number of contributing federal political committee. **C** C00430256

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : **AEA66EB2BEDA34DC8BC8**

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 800 NORTH BLDG.

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 23 / 2019

Transaction ID : **AAE15804ECE0B4F589E7**

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 601 13TH STREET, NW
12TH FLOOR

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A503949B72E104561AEC**

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
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)
 11a 11b 11c 11d
 12 13a 13b 14 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)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DELOITTE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 365

City WASHINGTON State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : **AB2501E7969FD4B37831**

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DAVITA INC. POLITICAL ACTION COMMITTEE (DAPAC)

Mailing Address 32275 32ND AVE, S.

City FEDERAL WAY State WA Zip Code 98001

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : **A4C3A1F0894284638894**

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN SOYBEAN ASSOCIATION POLITICAL ACTION COMMITTEE (SOYPAC)

Mailing Address 540 MARYVILLE CENTRE DR SUITE 390
 PO BOX 419200

City SAINT LOUIS State MO Zip Code 63141-5828

FEC ID number of contributing federal political committee. **C** C00408468

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : **A662E98610CA14FC6B65**

Amount of Each Receipt this Period
 2500.00

Memo Item

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

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

7500.00

**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 36 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VISA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 325 7TH STREET, NW
SUITE 800

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00365122

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	31	/	2019

Transaction ID : ACF8E4751E3643669A6

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	22	/	2019

Transaction ID : A8CA793EE981A4223A9C

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF CARDIOLOGY POLITICAL ACTION COMMITTEE

Mailing Address 2400 N ST NW

City WASHINGTON	State DC	Zip Code 20037
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	19	/	2019

Transaction ID : A4FA19303AC404A75912

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
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 37 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)

Mailing Address 1166 AVENUE OF THE AMERICAS

City NEW YORK	State NY	Zip Code 10036
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00457234

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : AB5665C43A3C54B918EE

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1875 I STREET, NW
SUITE 600

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2019

Transaction ID : A708938EB92784694B28

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ALLSTATE INSURANCE COMPANY PAC

Mailing Address 2775 SANDERS ROAD SUITE A2W

City NORTHBROOK	State IL	Zip Code 60062
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00040253

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2019

Transaction ID : A403151001601420A86C

Amount of Each Receipt this Period
 _____ 5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 7000.00
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 38 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2019

Transaction ID : AFB9B72CE234C428B8A2

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC

Mailing Address 1801 K STREET, NW

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : A5B4598F1487A40ED834

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BEST BUY CO., INC. EMPLOYEE POLITICAL FORUM

Mailing Address 7601 PENN AVENUE SOUTH

City RICHFIELD	State MN	Zip Code 55423
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00405076

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : AD6C83631B85246119AD

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	12500.00
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 39 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 MADISON AVENUE
ROOM 1109

City NEW YORK	State NY	Zip Code 10010
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : A89CFF5C0BC7248F48C0

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THE PREMIER, INC. EMPLOYEES' CIVIC ACTION FUND

Mailing Address 444 NORTH CAPITOL STREET, NW
SUITE 625

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00346288

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : A5DE5F366AAB04EF8B84

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : A3871709959024FCBB92

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	9500.00
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 40 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BUNGE NORTH AMERICA INC POLITICAL ACTION COMMITTEE

Mailing Address 750 FIRST STREET NE SUITE 1070

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401687

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : ADBA9F4CB3DB14AD7814

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 PENNSYLVANIA AVENUE, NW
SUITE 750

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : AE4A9584BE7A8476CA89

Amount of Each Receipt this Period
 _____ 5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GOOGLE LLC NETPAC

Mailing Address 25 MASSACHUSETTS AVE, NW
9TH FLOOR

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00428623

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : A038FF4DE26764FF6BB1

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 7000.00
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 41 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWARDS LIFESCIENCES POLITICAL ACTION COMMITTEE (EWPAC)

Mailing Address **ONE EDWARDS WAY**

City IRVINE	State CA	Zip Code 92614
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00411900**

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : A2E6E0FEC76354345B26

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

Mailing Address **555 12TH STREET, NW
SUITE 660**

City WASHINGTON	State DC	Zip Code 20004
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00217638**

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : A91184381E53E432D9A8

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address **1680 CAPITAL ONE DRIVE
ATTN:12067-1600**

City MCLEAN	State VA	Zip Code 22102
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00326595**

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2019

Transaction ID : A1B4E802F81204A97B0A

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="8000.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

**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 42 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN RENTAL ASSOCIATION POLITICAL ACTION COMMITTEE (ARAPAC)

Mailing Address 1900-19TH STREET

City MOLINE	State IL	Zip Code 61265
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00107615

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2019

Transaction ID : A08AB37EB232047D8884

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CARGILL, INCORPORATED POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 9300
C/O CARGILL, INC. / CORP A&F / DEP

City MINNEAPOLIS	State MN	Zip Code 55440
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00067884

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : A2EF52E7503F44CF9804

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FRESENIUS MEDICAL CARE NORTH AMERICA PAC

Mailing Address 801 PENNSYLVANIA AVENUE, NW
SUITE 255

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401299

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2019

Transaction ID : AB8A09CA0C29C466CBB7

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	8500.00
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 43 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 50 F STREET NW
SUITE 900

City WASHINGTON State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 29 / 2019

Transaction ID : **A975B21DDC4F34F5FBF9**

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AT&T FEDERAL PAC

Mailing Address 208 S AKARD ST
STE 2701

City DALLAS State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **A9CB8278F4E0840EBBD8**

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN DEERE POLITICAL ACTION COMMITTEE

Mailing Address ONE JOHN DEERE PLACE

City MOLINE State IL Zip Code 61265-8010

FEC ID number of contributing federal political committee. **C** C00204099

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : **AD5DEFC3EB0A8415E90D**

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	12500.00
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: PAGE 44 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL PROPANE GAS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1899 L STREET, NW
SUITE 350

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00079681

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2019

Transaction ID : **A32242D9E051C4FC79C2**

Amount of Each Receipt this Period
 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RAYTHEON PAC

Mailing Address 1100 WILSON BLVD, SUITE 1500

City ARLINGTON State VA Zip Code 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2019

Transaction ID : **AF5933B669F0E4B1B99F**

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
JOHN DEERE POLITICAL ACTION COMMITTEE

Mailing Address ONE JOHN DEERE PLACE

City MOLINE State IL Zip Code 61265-8010

FEC ID number of contributing federal political committee. **C** C00204099

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2019

Transaction ID : **ADE0B334F70374324A51**

Amount of Each Receipt this Period
 5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 8500.00

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 45 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE)

Mailing Address 4301 WILSON BLVD

City ARLINGTON	State VA	Zip Code 22203-1867
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2019

Transaction ID : A866FF21640264776BC7

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address ONE STATE FARM PLAZA
C/O MARK SCHWAMBERGER, TREASURER,

City BLOOMINGTON	State IL	Zip Code 61710
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00544817

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2019

Transaction ID : A97B520B0E4FC4515AF8

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
VOYA FINANCIAL, INC., POLITICAL ACTION COMMITTEE (VOYA FINANCIAL PAC)

Mailing Address 230 PARK AVENUE
C/O CHIEF LEGAL OFFICER

City NEW YORK	State NY	Zip Code 10169
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00184028

Name of Employer	Occupation
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2019

Transaction ID : A77801D58778447D3A12

Amount of Each Receipt this Period
 1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5000.00
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 46 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

Mailing Address 11921 FREEDOM DRIVE
SUITE 1100

City RESTON	State VA	Zip Code 20190-5634
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 29 / 2019

Transaction ID : A3AA198DF0AAC4C8E905

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA	State GA	Zip Code 30328-3474
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2019

Transaction ID : A87205B5368AD409B952

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE HARTFORD FINANCIAL SERVICES GROUP, INC. FEDERAL PAC (AKA HARTFORD ADVOCATES FEDERAL FUND)

Mailing Address ONE HARTFORD PLAZA
HO-1-11

City HARTFORD	State CT	Zip Code 06155
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00511444

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2019

Transaction ID : AF58923E8E11D4EB8A9B

Amount of Each Receipt this Period
3000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
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 47 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVENUE, NW
SUITE 1000 EAST

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2019

Transaction ID : **A2CD609F2C9A34C98962**

Amount of Each Receipt this Period

1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 929 LONG BRIDGE DRIVE

City ARLINGTON	State VA	Zip Code 22202-4208
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2019

Transaction ID : **A195AE69A709F476FBD8**

Amount of Each Receipt this Period

1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SYNGENTA CORPORATION PAC

Mailing Address 1775 PENNSYLVANIA AVENUE NW
SUITE 600

City WASHINGTON	State DC	Zip Code 20006-4602
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00363945

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **AE8EE5B9AD479493B9DE**

Amount of Each Receipt this Period

1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3000.00
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 48 OF 100	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MYLAN INC. POLITICAL ACTION COMMITTEE (MYPAC)

Mailing Address 660 N CAPITOL STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00332395

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : **AB1055A86082D4177AC9**

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC POLITICAL ACTION COMMITTEE

Mailing Address 20 F STREET, NW
SUITE 610

City WASHINGTON State DC Zip Code 20001-6707

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : **ADB0C3BC11C114EC78F6**

Amount of Each Receipt this Period
2500.00

Memo Item

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	199500.00

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

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

FOR LINE NUMBER: PAGE 49 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TEAM LAHOOD

Mailing Address 824 S MILLEDGE AVE STE 101

City: ATHENS State: GA Zip Code: 30605

FEC ID number of contributing federal political committee: **C** C00619486

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
26692.46

Date of Receipt: 03 / 31 / 2019

Transaction ID : **A36585FFD3B984A9F86D**

Amount of Each Receipt this Period: 2143.77

Memo Item
TRANSFER OF NET JFC FUNDS

B. Full Name (Last, First, Middle Initial)
ROWE, JOHN, W, ,

Mailing Address PO BOX 805398

City: CHICAGO State: IL Zip Code: 60680-4183

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

Name of Employer: Occupation: NONE RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt: 02 / 19 / 2019

Transaction ID : **AF48DD32B27FF45CCA3C**

Amount of Each Receipt this Period: 2600.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TEAM LAHOOD

Mailing Address 824 S MILLEDGE AVE STE 101

City: ATHENS State: GA Zip Code: 30605

FEC ID number of contributing federal political committee: **C** C00619486

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
26692.46

Date of Receipt: 03 / 31 / 2019

Transaction ID : **AFE2CB3D4FB57449AAFE**

Amount of Each Receipt this Period: 15237.24

Memo Item
TRANSFER OF NET JFC FUNDS

SUBTOTAL of Receipts This Page (optional)..... ▶ 17381.01

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)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 50 OF 100

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LUND, CAROL, , ,

Mailing Address 5150 TAMIAMI TRAIL STE 300

City NAPLES	State FL	Zip Code 34103-2818
----------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2019

Transaction ID : **A00339D2438E040AA966**

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GREENBERG TRAURIG, P.A. PAC

Mailing Address 54 STATE ST., FLOOR 6

City ALBANY	State NY	Zip Code 12207-2510
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00266585

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2019

Transaction ID : **AA4F45F38FCF8466194C**

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
VONACHEN, STEVEN, R, ,

Mailing Address 10701 N GRAND OAK CT

City PEORIA	State IL	Zip Code 61615-1151
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2019

Transaction ID : **A14350EF2E8C14C6592B**

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
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: PAGE 51 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GLYNN, CHRISTOPHER, E., ,

Mailing Address 63 SAINT MARKS CIR

City MORTON State IL Zip Code 61550-3132

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2019

Transaction ID : **AAB7BFA307665461EBDF**

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FITES, DONALD, , ,

Mailing Address 9943 BRASSIE BEND

City NAPLES State FL Zip Code 34108-1923

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2019

Transaction ID : **A6D74E751EC0D49B6B35**

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RASSI, ALAN, , ,

Mailing Address 4910 N GRANDVIEW DR

City PEORIA HEIGHTS State IL Zip Code 61616-5373

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2019

Transaction ID : **AAEF0E1FFEBB74955A00**

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

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

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

_____ 0.00

**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 52 OF 100
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ARMSTRONG, EFFIE, , ,

Mailing Address 4770 VIA DEL CORSO LN UNIT 401

City BONITA SPRINGS	State FL	Zip Code 34134-5029
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : **A99F0E54AE0F44DCFA2D**

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
ARMSTRONG, ALBERT, , ,

Mailing Address 4770 VIA DEL CORSO, UNIT 401

City BONITA SPRINGS	State FL	Zip Code 34134-5029
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : **A605BACB5E9E849BA93C**

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
WISE, KENT, , ,

Mailing Address 567 E HIGH POINT RD

City PEORIA	State IL	Zip Code 61614-2238
----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : **AFA62A7BEB49B420886C**

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>

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

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

FOR LINE NUMBER: PAGE 53 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CREW, DOUGLAS, , ,

Mailing Address 105 W SOUTHBAY DR

City CHILLICOTHE State IL Zip Code 61523-2153

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2019

Transaction ID : **A86C0C44345D34CF09A8**

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 313 NEAPOLITAN WAY

City NAPLES State FL Zip Code 34103-8557

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2019

Transaction ID : **A2CBF05AEBF6641C1946**

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 6911 N HUNTERS TRCE

City PEORIA State IL Zip Code 61614-3043

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2019

Transaction ID : **A8BF2B74D528041529B4**

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 54 OF 100

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VONACHEN, JAY, R, ,
 Mailing Address PO BOX 3860

City PEORIA State IL Zip Code 61612-3860

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1530.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2019

Transaction ID : **A96D4640B0B8E456E8E0**

Amount of Each Receipt this Period
 1530.00

Memo Item

IN-KIND: JFC EVENT CATERING

B. Full Name (Last, First, Middle Initial)
FITES, DONALD, , ,
 Mailing Address 9943 BRASSIE BEND

City NAPLES State FL Zip Code 34108-1923

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2019

Transaction ID : **AF554DF3D232B4897B5D**

Amount of Each Receipt this Period
 300.00

Memo Item

IN-KIND: JFC EVENT CATERING

C. Full Name (Last, First, Middle Initial)
ROWE, JOHN, W, ,
 Mailing Address PO BOX 805398

City CHICAGO State IL Zip Code 60680-4183

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2019

Transaction ID : **A009A65D612284D66883**

Amount of Each Receipt this Period
 2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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: PAGE 55 OF 100
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CLAWSON, CURTIS, J, ,

Mailing Address 8951 BONITA BEACH RD #525-356

City: BONITA SPRINGS State: FL Zip Code: 34135-4201

FEC ID number of contributing federal political committee: **C** H4FL19074

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2019

Transaction ID : **A31066C5E72A74F7BA8F**

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LAHOOD, STEPHEN, , ,

Mailing Address 230 OSPREY POINT DR

City: OSPREY State: FL Zip Code: 34229-9249

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

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2019

Transaction ID : **A269E4534C15C48E1A12**

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 7625 N UNIVERSITY ST
STE C

City: PEORIA State: IL Zip Code: 61614-1213

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

Name of Employer: WALDLAND CORP. Occupation: REAL ESTATE DEVELOPER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2019

Transaction ID : **A166DEE2AAF5647BA80C**

Amount of Each Receipt this Period
 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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: PAGE 56 OF 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOOSE, JERRY, , ,

Mailing Address 4N657 HIDDEN OAKS RD

City SAINT CHARLES	State IL	Zip Code 60175-8512
-----------------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2019

Transaction ID : **A0692C6B51A664315896**

Amount of Each Receipt this Period
750.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SULLIVAN, KEVIN, F, ,

Mailing Address 110 SW JEFFERSON AVE
STE 530

City PEORIA	State IL	Zip Code 61602-1247
----------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 26 / 2019

Transaction ID : **A67767B4BC98944CAA5B**

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ALEMBIK, STEVEN, , ,

Mailing Address 1381 SW 16TH ST

City BOCA RATON	State FL	Zip Code 33486-6662
--------------------	-------------	------------------------

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

Name of Employer SMA COMMUNICATIONS LLC	Occupation OWNER
--	---------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 26 / 2019

Transaction ID : **A687ADD59FAE24750B18**

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	17381.01

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 57 OF 100	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAHOOD, DARIN, , ,

Mailing Address 11607 N GLENSHIRE DR

City DUNLAP	State IL	Zip Code 61525-8810
----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer US HOUSE OF REPRESENTATIVES	Occupation CONGRESSMAN
---	---------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : A64E034BB7922431BA39

Amount of Each Receipt this Period

Memo Item
MILEAGE-PERSONAL USE OF CAMPAIGN VEHICLE

B. Full Name (Last, First, Middle Initial)
LAHOOD, DARIN, , ,

Mailing Address 11607 N GLENSHIRE DR

City DUNLAP	State IL	Zip Code 61525-8810
----------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer US HOUSE OF REPRESENTATIVES	Occupation CONGRESSMAN
---	---------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : AFE1D1AE35D5448CCADA

Amount of Each Receipt this Period

Memo Item
MILEAGE-PERSONAL USE OF CAMPAIGN VEHICLE

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="255.42"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="255.42"/>

**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 58 OF 100			
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LAHOOD, KATHLEEN, I, MRS.,			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2019		
Mailing Address 5612 W GRANDE CIR			FEC Identification Number C		
City PEORIA	State IL	Zip Code 61615-2274	Amount of Each Disbursement this Period 2292.32		
Purpose of Disbursement IN-KIND:EVENT SUPPLIES		Category/ Type	Transaction ID : B228E4676F29D415DAEF		
Candidate Name		Memo Item <input type="checkbox"/>			
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. STATE FARM			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019		
Mailing Address PO BOX 680001			FEC Identification Number C		
City DALLAS	State TX	Zip Code 75368-0001	Amount of Each Disbursement this Period 101.65		
Purpose of Disbursement INSURANCE		Category/ Type	Transaction ID : BE9471D90DC4047D2940		
Candidate Name		Memo Item <input type="checkbox"/>			
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. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019		
Mailing Address PO BOX 4002			FEC Identification Number C		
City ACWORTH	State GA	Zip Code 30101-9003	Amount of Each Disbursement this Period 222.10		
Purpose of Disbursement TELEPHONE		Category/ Type	Transaction ID : B825634E3FB374C9CA32		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	2616.07
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 59 OF 100			
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CEFCU			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019		
Mailing Address PO BOX 1715			FEC Identification Number C		
City PEORIA	State IL	Zip Code 61656-1715	Amount of Each Disbursement this Period 710.09		
Purpose of Disbursement CAMPAIGN VEHICLE		Category/ Type	Transaction ID : BA28133DC89A2409FB31		
Candidate Name			<input type="checkbox"/> Memo Item		
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. FIRST BAPTIST CHURCH			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2019		
Mailing Address 1701 W MOUND AVE			FEC Identification Number C		
City JACKSONVILLE	State IL	Zip Code 62650-2259	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type	Transaction ID : B8099CD7E36BF419394B		
Candidate Name			<input type="checkbox"/> Memo Item		
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. ITOO SOCIETY			Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2019		
Mailing Address 4909 W FARMINGTON RD			FEC Identification Number C		
City PEORIA	State IL	Zip Code 61604-4692	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type	Transaction ID : BD10FEBDFA99F4785BD4		
Candidate Name			<input type="checkbox"/> Memo Item		
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).....▶	1260.09
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 60 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CENTRAL ILLINOIS MS CLINIC SUPPORT FUND			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2019	
Mailing Address 530 NE GLEN OAK AVE.			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61637-0001	Amount of Each Disbursement this Period 750.00	
Purpose of Disbursement EVENT TICKETS		Category/Type	Transaction ID : B76501AF504864ED6AC3	
Candidate Name		Memo Item <input type="checkbox"/>		
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. MCLEAN COUNTY GOP			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2019	
Mailing Address PO BOX 1776			FEC Identification Number C	
City BLOOMINGTON	State IL	Zip Code 61702-1776	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement MEMBERSHIP DUES		Category/Type	Transaction ID : BB96F4CF9CB37451782B	
Candidate Name MCLEAN COUNTY GOP		Memo Item <input type="checkbox"/>		
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. MEMBER LUNCH FUND			Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2019	
Mailing Address 15 INDEPENDENCE AVE SE 1139 LONGWORTH HOB			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20515-6005	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement MEETING EXPENSE		Category/Type	Transaction ID : B296452EACA03465480F	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	2750.00
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 61 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2019	
Mailing Address 300 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 247.43	
Purpose of Disbursement MEETING EXPENSE		Category/Type	Transaction ID : B78C2FAE3501C48F99A7	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. PEORIA COUNTY REPUBLICAN CENTRAL COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2019	
Mailing Address 8835 N KNOXVILLE AVE.			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61615-1722	Amount of Each Disbursement this Period 377.97	
Purpose of Disbursement OFFICE RENT/UTILITIES/EQUIPMENT		Category/Type	Transaction ID : B890725056F55499D8CE	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. GREGG FLORIST, INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2019	
Mailing Address 1015 E WAR MEMORIAL DR			FEC Identification Number C	
City PEORIA HEIGHTS	State IL	Zip Code 61616-7657	Amount of Each Disbursement this Period 2046.74	
Purpose of Disbursement FLOWERS		Category/Type	Transaction ID : B8F024FE69AED4608A95	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional).....▶	2672.14
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 62 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PROFESSIONAL DATA SERVICES, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2019
Mailing Address 824 S MILLEDGE AVE STE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period 1803.11
Candidate Name		Transaction ID : BC7A086FFD8E5488F80B
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ARISTOTLE INTERNATIONAL, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2019
Mailing Address 205 PENNSYLVANIA AVE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement SOFTWARE		Amount of Each Disbursement this Period 1875.00
Candidate Name		Transaction ID : B7995B40F837D4230BC8
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. STATE FARM		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2019
Mailing Address PO BOX 680001		FEC Identification Number C
City DALLAS	State TX	Zip Code 75368-0001
Purpose of Disbursement INSURANCE		Amount of Each Disbursement this Period 101.65
Candidate Name		Transaction ID : B6F0F38A7324C490DB48
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3779.76
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 63 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC BANK		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2019
Mailing Address PO BOX 609		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15230-0609
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period 100.00
Candidate Name		Transaction ID : B6A2CB7C79930497BB0D
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. OBERLANDER ALARM SYSTEMS, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2019
Mailing Address 2216 W ALTORFER DR		FEC Identification Number C
City PEORIA	State IL	Zip Code 61615-1846
Purpose of Disbursement RESIDENTIAL SECURITY EXPENSE		Amount of Each Disbursement this Period 138.00
Candidate Name		Transaction ID : BC715B01BB134414DB33
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. CEFCU		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2019
Mailing Address PO BOX 1715		FEC Identification Number C
City PEORIA	State IL	Zip Code 61656-1715
Purpose of Disbursement CAMPAIGN VEHICLE		Amount of Each Disbursement this Period 710.09
Candidate Name		Transaction ID : B82778F985E2D45DF92B
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	948.09
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 64 OF 100	
	<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)
LAHOOD FOR CONGRESS

A. SANGAMON COUNTY REPUBLICAN CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1132 SANGAMON AVE.

City SPRINGFIELD State IL Zip Code 62702-1853

Purpose of Disbursement
EVENT TICKETS

Candidate Name
SANGAMON COUNTY REPUBLICAN CENTRAL COMMITTEE

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 01 / 2019

FEC Identification Number
C

Amount of Each Disbursement this Period
2500.00

Transaction ID : BD61B47AB0DFC428BA79

Memo Item

B. GORDON, STOCKMAN & WAUGH, PC

Full Name (Last, First, Middle Initial)
Mailing Address 8726 N INDUSTRIAL RD

City PEORIA State IL Zip Code 61615-1506

Purpose of Disbursement
ACCOUNTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 01 / 2019

FEC Identification Number
C

Amount of Each Disbursement this Period
500.00

Transaction ID : B0B2C3C45C2AF4A6780E

Memo Item

C. COYLE, KATHERINE, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 10511 N SUNRISE CT

City PEORIA State IL Zip Code 61615-8831

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 01 / 2019

FEC Identification Number
C

Amount of Each Disbursement this Period
2000.00

Transaction ID : B1BFBA6EEA3CF42B3BD4

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 5000.00

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 65 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2019
Mailing Address PO BOX 4002		FEC Identification Number C
City ACWORTH	State GA	Zip Code 30101-9003
Purpose of Disbursement TELEPHONE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 165.51	
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) ▼	Transaction ID : BEBD7B9585F934BA3AFC
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. NORTH POINT STORAGE		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2019
Mailing Address 9000 N LOCUST LN		FEC Identification Number C
City PEORIA	State IL	Zip Code 61615-1725
Purpose of Disbursement STORAGE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 996.00	
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) ▼	Transaction ID : B5262D22E29794DACB14
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. GREGG FLORIST, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2019
Mailing Address 1015 E WAR MEMORIAL DR		FEC Identification Number C
City PEORIA HEIGHTS	State IL	Zip Code 61616-7657
Purpose of Disbursement FLOWERS	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 99.87	
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) ▼	Transaction ID : B4ED0BACE39094509912
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1261.38
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 66 OF 100			
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ILLINOIS STATE SOCIETY			Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2019		
Mailing Address PO BOX 320776			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22320-4776	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement MEMBERSHIP DUES		Category/Type	Transaction ID : B44D902D16AFF402FBF0		
Candidate Name		Memo Item <input type="checkbox"/>			
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. HODAS & ASSOCIATES			Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2019		
Mailing Address 960 CLOCK TOWER DR STE J			FEC Identification Number C		
City SPRINGFIELD	State IL	Zip Code 62704-1371	Amount of Each Disbursement this Period 149375.34		
Purpose of Disbursement DIRECT MARKETING/MAIL PRODUCTION		Category/Type	Transaction ID : BE7F7A38203194C448CB		
Candidate Name		Memo Item <input type="checkbox"/>			
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. LANTZ CATERING			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2019		
Mailing Address 2 FLORENCE RD			FEC Identification Number C		
City ROCHESTER	State IL	Zip Code 62563-9426	Amount of Each Disbursement this Period 400.00		
Purpose of Disbursement EVENT CATERING		Category/Type	Transaction ID : B4145B26407584050B5F		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	150275.34
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 67 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STARK COUNTY REPUBLICAN CENTRAL COMM			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2019	
Mailing Address PO BOX 80			FEC Identification Number C	
City WYOMING	State IL	Zip Code 61491-0080	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement EVENT SPONSORSHIP		Category/Type	Transaction ID : B85D577F6AF6E4C2BA0B	
Candidate Name STARK COUNTY REPUBLICAN CENTRAL COMM		Disbursement For:	Memo Item <input type="checkbox"/>	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:			

Full Name (Last, First, Middle Initial) B. PEORIA COUNTY REPUBLICAN CENTRAL COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2019	
Mailing Address 8835 N KNOXVILLE AVE.			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61615-1722	Amount of Each Disbursement this Period 362.20	
Purpose of Disbursement OFFICE RENT/UTILITIES/EQUIPMENT		Category/Type	Transaction ID : B621C754D4CF74C76BA8	
Candidate Name		Disbursement For:	Memo Item <input type="checkbox"/>	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:			

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2019	
Mailing Address 300 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 410.22	
Purpose of Disbursement MEETING EXPENSE		Category/Type	Transaction ID : BBDA06AF0977B40FFB10	
Candidate Name		Disbursement For:	Memo Item <input type="checkbox"/>	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....▶	1272.42
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 68 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2019	
Mailing Address PO BOX 84314			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 41.60	
Purpose of Disbursement CC TRANSACTION FEES		Category/Type	Transaction ID : B2CA723EFADFA46E784B	
Candidate Name		Memo Item <input type="checkbox"/>		
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. PNC BANK			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2019	
Mailing Address PO BOX 609			FEC Identification Number C	
City PITTSBURGH	State PA	Zip Code 15230-0609	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement BANK FEES		Category/Type	Transaction ID : BAA3DC2C3644F4C3C8CD	
Candidate Name		Memo Item <input type="checkbox"/>		
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. CEFCU			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019	
Mailing Address PO BOX 1715			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61656-1715	Amount of Each Disbursement this Period 710.09	
Purpose of Disbursement CAMPAIGN VEHICLE		Category/Type	Transaction ID : B739339B5F68C49B1AD9	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	851.69
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 69 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COYLE, KATHERINE, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019	
Mailing Address 10511 N SUNRISE CT			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61615-8831	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : B953187109F7545EFBEB	
Candidate Name		Memo Item <input type="checkbox"/>		
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2019	
Mailing Address PO BOX 84314			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 60.30	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : B472E4CA11F5B4D94BAD	
Candidate Name		Memo Item <input type="checkbox"/>		
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2019	
Mailing Address PO BOX 84314			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 54.30	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : BA1CF3F9BCA3D4014842	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	2114.60
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 70 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STATE FARM			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2019	
Mailing Address PO BOX 680001			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75368-0001	Amount of Each Disbursement this Period 101.65	
Purpose of Disbursement INSURANCE		Category/Type	Transaction ID : BC3A3D71558A94B278FD	
Candidate Name		Memo Item <input type="checkbox"/>		
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. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2019	
Mailing Address PO BOX 4002			FEC Identification Number C	
City ACWORTH	State GA	Zip Code 30101-9003	Amount of Each Disbursement this Period 165.51	
Purpose of Disbursement TELEPHONE		Category/Type	Transaction ID : B8CDDBE8279B04E9091A	
Candidate Name		Memo Item <input type="checkbox"/>		
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. USPS			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2019	
Mailing Address 6310 N UNIVERSITY ST			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61614-8905	Amount of Each Disbursement this Period 134.00	
Purpose of Disbursement PO BOX RENEWAL FEE		Category/Type	Transaction ID : B6251903510384CEC9DF	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	401.16
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 71 OF 100			
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2019		
Mailing Address PO BOX 84314			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 40.30		
Purpose of Disbursement CC TRANSACTION FEES		Category/Type	Transaction ID : BD43270CB03D242CCB94		
Candidate Name		Memo Item <input type="checkbox"/>			
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. THE VOYAGEUR COMPANY, LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2019		
Mailing Address 1151 ORCHARD CIR			FEC Identification Number C		
City SAINT PAUL	State MN	Zip Code 55118-4146	Amount of Each Disbursement this Period 16925.73		
Purpose of Disbursement DIRECT MAIL/POSTAGE/LIST RENTAL		Category/Type	Transaction ID : B6530D527D0EF4B3A9D9		
Candidate Name		Memo Item <input type="checkbox"/>			
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2019		
Mailing Address PO BOX 84314			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 40.30		
Purpose of Disbursement CC TRANSACTION FEES		Category/Type	Transaction ID : BAB43BC6E95614E15A15		
Candidate Name		Memo Item <input type="checkbox"/>			
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).....▶	17006.33
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 72 OF 100			
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GREGG FLORIST, INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2019		
Mailing Address 1015 E WAR MEMORIAL DR			FEC Identification Number C		
City PEORIA HEIGHTS	State IL	Zip Code 61616-7657	Amount of Each Disbursement this Period 117.25		
Purpose of Disbursement FLOWERS		Category/Type	Transaction ID : B969A6937FD23475DB92		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. PROFESSIONAL DATA SERVICES, INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2019		
Mailing Address 824 S MILLEDGE AVE STE 101			FEC Identification Number C		
City ATHENS	State GA	Zip Code 30605-1332	Amount of Each Disbursement this Period 1764.66		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type	Transaction ID : B8707E2D1C56F432BBFC		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2019		
Mailing Address PO BOX 84314			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 490.20		
Purpose of Disbursement CC TRANSACTION FEES		Category/Type	Transaction ID : B3A12A3C1B08C4E0E976		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>		
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional).....▶	2372.11
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 73 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2019
Mailing Address 300 1ST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1801
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 650.87
Candidate Name		Transaction ID : B6AD49F06AB5E477D94A
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2019
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884-4314
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 41.60
Candidate Name		Transaction ID : B4546C1584DCE4F6DAEB
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. PEORIA COUNTY REPUBLICAN CENTRAL COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2019
Mailing Address 8835 N KNOXVILLE AVE.		FEC Identification Number C
City PEORIA	State IL	Zip Code 61615-1722
Purpose of Disbursement OFFICE RENT/UTILITIES/EQUIPMENT		Amount of Each Disbursement this Period 330.41
Candidate Name		Transaction ID : B0D84FAD12BF44DE3ACC
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1022.88
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 74 OF 100			
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GREGG FLORIST, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2019
Mailing Address 1015 E WAR MEMORIAL DR		FEC Identification Number C
City PEORIA HEIGHTS	State IL	Zip Code 61616-7657
Purpose of Disbursement FLOWERS	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 99.22	
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) ▼	Transaction ID : B459B089C4A26478A946
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PROFESSIONAL DATA SERVICES, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2019
Mailing Address 824 S MILLEDGE AVE STE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1750.00	
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) ▼	Transaction ID : BE502C13DBCA8444EA7E
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ARISTOTLE INTERNATIONAL, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2019
Mailing Address 205 PENNSYLVANIA AVE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1875.00	
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) ▼	Transaction ID : B8318CFF45FF54826AFD
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3724.22
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 75 OF 100			
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2019		
Mailing Address PO BOX 84314			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 198.30		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : B9B01DB13D6084BCAB94		
Candidate Name		<input type="checkbox"/> Memo Item			
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2019		
Mailing Address PO BOX 84314			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 13.50		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : B6FA57A5179D24A06A7B		
Candidate Name		<input type="checkbox"/> Memo Item			
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2019		
Mailing Address PO BOX 84314			FEC Identification Number C		
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 34.60		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : BB019223C8C8749C2845		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	246.40
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 76 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICA'S GOLD STAR FAMILIES			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2019	
Mailing Address 2416 W CORNERSTONE CT			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61614-2492	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement EVENT SPONSORSHIP		Category/Type	Transaction ID : B45A1D27DBBD7455DBE8	
Candidate Name		Memo Item <input type="checkbox"/>		
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. PNC BANK			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2019	
Mailing Address PO BOX 609			FEC Identification Number C	
City PITTSBURGH	State PA	Zip Code 15230-0609	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement BANK FEES		Category/Type	Transaction ID : B78953FADEB1E4632932	
Candidate Name		Memo Item <input type="checkbox"/>		
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. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2019	
Mailing Address PO BOX 84314			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 65.20	
Purpose of Disbursement CC TRANSACTION FEES		Category/Type	Transaction ID : B1711AF65E0E54863983	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	665.20
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 77 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2019	
Mailing Address PO BOX 84314			FEC Identification Number C	
City BATON ROUGE	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 398.90	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : BB66FF5A40C0C435A9FA	
Candidate Name		<input type="checkbox"/> Memo Item		
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. CHASE CARD SERVICES			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019	
Mailing Address 270 PARK AVE			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10017-2014	Amount of Each Disbursement this Period 571.96	
Purpose of Disbursement SEE MEMO		Category/ Type	Transaction ID : BB5BEB683B5C24B45AD4	
Candidate Name		<input type="checkbox"/> Memo Item		
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. SOUTHWEST AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019	
Mailing Address SOUTHWEST AIRLINES PO BOX 36647-1CR			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75235	Amount of Each Disbursement this Period 571.96	
Purpose of Disbursement AIRFARE		Category/ Type	Transaction ID : B1A4268F8ACCB40F7946	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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).....▶	970.86
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 78 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC BANK		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019
Mailing Address PO BOX 609		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15230-0609
Purpose of Disbursement SEE MEMO ENTRIES		Amount of Each Disbursement this Period 11318.43
Candidate Name		Transaction ID : BF54FEDFF145447EE80C
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. EXXONMOBILE		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019
Mailing Address 1901 W JEFFERSON ST		FEC Identification Number C
City SPRINGFIELD	State IL	Zip Code 62702-2201
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 167.48
Candidate Name		Transaction ID : BDE5A4C8865D8453D9A3
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019
Mailing Address 1455 MARKET ST FL 4		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103-1355
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 248.61
Candidate Name		Transaction ID : B980FDD9A44574791AE9
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	11318.43
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 79 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JIMMY JOHNS			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address 8516 N KNOXVILLE AVE			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61615-2034	Amount of Each Disbursement this Period 44.12	
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : B4ED07FB4147342F7B66	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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. WHITE HOUSE HISTORICAL ASSOCIATION			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address 1610 H ST NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20006-4907	Amount of Each Disbursement this Period 1725.95	
Purpose of Disbursement DONOR GIFTS-ORNAMENTS		Category/ Type	Transaction ID : BA649D9623CDD4B1396F	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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. POTTERY BARN KIDS			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address 3250 VAN NESS AVE			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94109-1012	Amount of Each Disbursement this Period 259.47	
Purpose of Disbursement CONSULTANT BABY GIFT		Category/ Type	Transaction ID : BD71A79F64F214506B82	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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).....▶	0.00
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 80 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019
Mailing Address 1901 W 22ND ST		FEC Identification Number C
City OAK BROOK	State IL	Zip Code 60523-1759
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 145.83	
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) ▼	Transaction ID : B78229B49BB154B15A19
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C
City FT WORTH	State TX	Zip Code 76155-2605
Purpose of Disbursement AIRFARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 505.51	
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) ▼	Transaction ID : B207E964E10A04F6CAF4
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ENTERPRISE RENT-A-CAR		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019
Mailing Address 600 CORPORATE PARK DR		FEC Identification Number C
City SAINT LOUIS	State MO	Zip Code 63105-4204
Purpose of Disbursement TRAVEL EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 13.43	
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) ▼	Transaction ID : BF000AE99A2DF4AF9A2F
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 81 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address 6310 N UNIVERSITY ST			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61614-8905	Amount of Each Disbursement this Period 2585.85	
Purpose of Disbursement POSTAGE		Category/Type	Transaction ID : B725AD8C08A98408D83B	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. RICHWOODS HIGH SCHOOL			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address 6301 N UNIVERSITY ST			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61614-3453	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement ADVERTISING		Category/Type	Transaction ID : B7D18DDCFDD384FD18CA	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. AMBAR			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address 523 8TH ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-2835	Amount of Each Disbursement this Period 298.60	
Purpose of Disbursement MEETING EXPENSE		Category/Type	Transaction ID : BA7CCC95BE80B47B6854	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	0.00
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 82 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE CAPITAL GRILLE			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address 601 PENNSYLVANIA AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20004-2601	Amount of Each Disbursement this Period 1593.35	
Purpose of Disbursement EVENT CATERING		Category/ Type	Transaction ID : B7CDC074C1ED34130B9E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. HOTELS.COM			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address 10440 N CENTRAL EXPY STE 400			FEC Identification Number C	
City DALLAS	State TX	Zip Code 75231-2228	Amount of Each Disbursement this Period 486.05	
Purpose of Disbursement LODGING		Category/ Type	Transaction ID : B205B8BA6A5144EA286A	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. BELLEMORE			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019	
Mailing Address 564 W RANDOLPH ST			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60661-2218	Amount of Each Disbursement this Period 643.55	
Purpose of Disbursement EVENT CATERING		Category/ Type	Transaction ID : BE74D101079174E9F9E2	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	0.00
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 83 OF 100			
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 2 CHEZ			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019		
Mailing Address 7815 N KNOXVILLE AVE			FEC Identification Number C		
City PEORIA	State IL	Zip Code 61614-2078	Amount of Each Disbursement this Period 212.05		
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : B668154C300CB40BA832		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) B. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019		
Mailing Address PO BOX 4002			FEC Identification Number C		
City ACWORTH	State GA	Zip Code 30101-9003	Amount of Each Disbursement this Period 60.00		
Purpose of Disbursement TELEPHONE		Category/ Type	Transaction ID : BD8BFD7797A9E451F9DD		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) C. CHASE CARD SERVICES			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2019		
Mailing Address 270 PARK AVE			FEC Identification Number C		
City NEW YORK	State NY	Zip Code 10017-2014	Amount of Each Disbursement this Period 184.21		
Purpose of Disbursement SEE MEMO		Category/ Type	Transaction ID : B9C2F118CA2F248BB99A		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	184.21
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 84 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALAMO		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2019
Mailing Address 600 CORPORATE PARK DR		FEC Identification Number C
City SAINT LOUIS	State MO	Zip Code 63105-4204
Purpose of Disbursement CAR RENTAL		Amount of Each Disbursement this Period 184.21
Candidate Name		Transaction ID : BAAE1574E6608469BB21
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. CHASE CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2019
Mailing Address 270 PARK AVE		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10017-2014
Purpose of Disbursement SEE MEMO ENTRIES		Amount of Each Disbursement this Period 1200.45
Candidate Name		Transaction ID : B3DCD3A548DCA45FA863
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. JACKSON HOLE MOUNTAIN RESORT		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2019
Mailing Address 3395 CODY LN		FEC Identification Number C
City TETON VILLAGE	State WY	Zip Code 83025
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 262.37
Candidate Name		Transaction ID : B16BACEEFD81141BEA78
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1200.45
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 85 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC BANK		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019
Mailing Address PO BOX 609		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15230-0609
Purpose of Disbursement SEE MEMO ENTRIES		Amount of Each Disbursement this Period 5677.17
Candidate Name		Transaction ID : B2E87C86D272945D1A0F
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. SNAP TRAVEL		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019
Mailing Address 180 SANSOME ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94104-3713
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 279.06
Candidate Name		Transaction ID : B4E17244ABF5640ABA57
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN HEART ASSOCIATION		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019
Mailing Address 7272 GREENVILLE AVE		FEC Identification Number C
City DALLAS	State TX	Zip Code 75231-5129
Purpose of Disbursement EVENT SPONSORSHIP		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : BC58FAAD6C6494D158B8
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	5677.17
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 86 OF 100	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
LAHOOD FOR CONGRESS

A. THE CAPITAL GRILLE Full Name (Last, First, Middle Initial) Mailing Address 601 PENNSYLVANIA AVE NW City WASHINGTON State DC Zip Code 20004-2601 Purpose of Disbursement MEETING EXPENSE 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:			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019 FEC Identification Number C Amount of Each Disbursement this Period 479.03 Transaction ID : B190DCA28322D43429EA <input checked="" type="checkbox"/> Memo Item
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B. #57 OCEAN Full Name (Last, First, Middle Initial) Mailing Address 1341 G ST NW City WASHINGTON State DC Zip Code 20005-3105 Purpose of Disbursement MEETING EXPENSE 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:			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019 FEC Identification Number C Amount of Each Disbursement this Period 229.20 Transaction ID : BB39E012540D746CDA35 <input checked="" type="checkbox"/> Memo Item
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C. MAGNOLIA'S RESTAURANT & CATERING Full Name (Last, First, Middle Initial) Mailing Address 130 N LAFAYETTE ST City MACOMB State IL Zip Code 61455-2226 Purpose of Disbursement EVENT CATERING 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:			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019 FEC Identification Number C Amount of Each Disbursement this Period 425.08 Transaction ID : B5CAADC9366BD4D48B3D <input checked="" type="checkbox"/> Memo Item
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SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	0.00

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 87 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TRUMP HOTEL		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019
Mailing Address 1100 PENNSYLVANIA AVE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20004-2501
Purpose of Disbursement LODGING		Amount of Each Disbursement this Period 208.20
Candidate Name		Transaction ID : B07101ED520424509905
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C
City FT WORTH	State TX	Zip Code 76155-2605
Purpose of Disbursement AIRFARE		Amount of Each Disbursement this Period 817.00
Candidate Name		Transaction ID : B630827E1C2CA40049EB
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. ENTERPRISE RENT-A-CAR		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019
Mailing Address 600 CORPORATE PARK DR		FEC Identification Number C
City SAINT LOUIS	State MO	Zip Code 63105-4204
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 145.91
Candidate Name		Transaction ID : BF1E0F28DF241401CBE1
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 88 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OBERLANDER ALARM SYSTEMS, INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019	
Mailing Address 2216 W ALTORFER DR			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61615-1846	Amount of Each Disbursement this Period 138.00	
Purpose of Disbursement RESIDENTIAL SECURITY EXPENSE			Transaction ID : BDF39F1CBBA6C44C4AF7	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019	
Mailing Address PO BOX 4002			FEC Identification Number C	
City ACWORTH	State GA	Zip Code 30101-9003	Amount of Each Disbursement this Period 60.00	
Purpose of Disbursement TELEPHONE			Transaction ID : BB3A3896DBD8C461E934	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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. USPS			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019	
Mailing Address 6310 N UNIVERSITY ST			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61614-8905	Amount of Each Disbursement this Period 110.00	
Purpose of Disbursement POSTAGE			Transaction ID : B74C38BCDE92947BF84F	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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).....▶	0.00
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 89 OF 100			
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EXXONMOBILE			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019		
Mailing Address 1901 W JEFFERSON ST			FEC Identification Number C		
City SPRINGFIELD	State IL	Zip Code 62702-2201	Amount of Each Disbursement this Period 159.60		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : BDD0752238F8A4FE7AFA		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. UBER			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019		
Mailing Address 1455 MARKET ST FL 4			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94103-1355	Amount of Each Disbursement this Period 192.73		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : BC221791D6E0F47B3852		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. DELTA AIR LINES			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019		
Mailing Address 1030 DELTA BLVD			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30354-1989	Amount of Each Disbursement this Period 940.00		
Purpose of Disbursement AIRFARE		Category/ Type	Transaction ID : BCCB62F3DE16C4861B8E		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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).....▶	0.00
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 90 OF 100			
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OSTERIA MORINI			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019		
Mailing Address 301 WATER ST SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-3734	Amount of Each Disbursement this Period 290.00		
Purpose of Disbursement MEETING EXPENSE		Category/ Type	Transaction ID : B5C946BC74DDE4A18815		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. SHELL OIL			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019		
Mailing Address 1000 MAIN ST FL 12			FEC Identification Number C		
City HOUSTON	State TX	Zip Code 77002-6367	Amount of Each Disbursement this Period 32.20		
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : BF420FC87CDC64BBCB13		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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. COYLE, KATHERINE, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019		
Mailing Address 10511 N SUNRISE CT			FEC Identification Number C		
City PEORIA	State IL	Zip Code 61615-8831	Amount of Each Disbursement this Period 2383.53		
Purpose of Disbursement SEE MEMO ENTRIES		Category/ Type	Transaction ID : BFEE92670735942B382B		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	2383.53
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 91 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT/OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019
Mailing Address 801 W LAKE AVE		FEC Identification Number C
City PEORIA	State IL	Zip Code 61614-5951
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 173.05
Candidate Name		Transaction ID : B0BACC1FA987B4CF58C0
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. COYLE, KATHERINE, , ,		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019
Mailing Address 10511 N SUNRISE CT		FEC Identification Number C
City PEORIA	State IL	Zip Code 61615-8831
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 2000.00
Candidate Name		Transaction ID : B9B34A22E6DF6486EB35
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2019
Mailing Address 6310 N UNIVERSITY ST		FEC Identification Number C
City PEORIA	State IL	Zip Code 61614-8905
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 100.00
Candidate Name		Transaction ID : BA5784AA639CD4177849
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 92 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHASE CARD SERVICES			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2019	
Mailing Address 270 PARK AVE			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10017-2014	Amount of Each Disbursement this Period 1600.00	
Purpose of Disbursement SEE MEMO		Category/Type	Transaction ID : B6535455A23704AB584D	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2019	
Mailing Address 223 S WACKER DR			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60606	Amount of Each Disbursement this Period 1600.00	
Purpose of Disbursement AIRFARE		Category/Type	Transaction ID : B94C9E1DC19FD421F989	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) C. PNC BANK			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address PO BOX 609			FEC Identification Number C	
City PITTSBURGH	State PA	Zip Code 15230-0609	Amount of Each Disbursement this Period 10593.72	
Purpose of Disbursement SEE MEMO ENTRIES		Category/Type	Transaction ID : B6B8992A80E044474A49	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	12193.72
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 93 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE CAPITAL GRILLE		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019
Mailing Address 601 PENNSYLVANIA AVE NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20004-2601
Purpose of Disbursement MEETING EXPENSE		Amount of Each Disbursement this Period 21.70
Candidate Name		Transaction ID : BB3C4E4DDFF7A4EED8E4
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. DEL FRISCO'S		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019
Mailing Address 1221 AVENUE OF THE AMERICAS		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10020-1001
Purpose of Disbursement EVENT CATERING		Amount of Each Disbursement this Period 430.25
Candidate Name		Transaction ID : BB272D370FBEB4D1B86E
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019
Mailing Address 6310 N UNIVERSITY ST		FEC Identification Number C
City PEORIA	State IL	Zip Code 61614-8905
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 65.00
Candidate Name		Transaction ID : BA1871C25618F4850BE2
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 94 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address 4333 AMON CARTER BLVD			FEC Identification Number C	
City FT WORTH	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 1441.69	
Purpose of Disbursement AIRFARE		Category/Type	Transaction ID : B02BDCEE2DFAE4E20B0D	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address PO BOX 4002			FEC Identification Number C	
City ACWORTH	State GA	Zip Code 30101-9003	Amount of Each Disbursement this Period 63.58	
Purpose of Disbursement TELEPHONE		Category/Type	Transaction ID : B592D52524299472A9B6	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) C. NAPLES BEACH HOTEL			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address 851 GULF SHORE BLVD N			FEC Identification Number C	
City NAPLES	State FL	Zip Code 34102-5332	Amount of Each Disbursement this Period 524.00	
Purpose of Disbursement LODGING		Category/Type	Transaction ID : B835A28B8CDCC47E4A7F	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 95 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WEGMANS			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address 1500 BROOKS AVE			FEC Identification Number C	
City ROCHESTER	State NY	Zip Code 14624-3512	Amount of Each Disbursement this Period 532.12	
Purpose of Disbursement EVENT CATERING		Category/Type	Transaction ID : B468CD0BA171A4DCC89B	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. UBER			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address 1455 MARKET ST FL 4			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103-1355	Amount of Each Disbursement this Period 189.11	
Purpose of Disbursement TRAVEL EXPENSE		Category/Type	Transaction ID : B0AB9A71588384853B69	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. INN AT PELICAN BAY			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address 800 VANDERBILT BEACH RD			FEC Identification Number C	
City NAPLES	State FL	Zip Code 34108-6725	Amount of Each Disbursement this Period 371.83	
Purpose of Disbursement LODGING		Category/Type	Transaction ID : B7B7119DF754B4779812	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	0.00
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 96 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PEORIA JOURNAL STAR			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address PO BOX 5201			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61601-5201	Amount of Each Disbursement this Period 683.35	
Purpose of Disbursement ADVERTISING		Category/Type	Transaction ID : BC13D544C89484A62A3A	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address 223 S WACKER DR			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60606	Amount of Each Disbursement this Period 4507.00	
Purpose of Disbursement AIRFARE		Category/Type	Transaction ID : BF2A238083CD846D4841	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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. EXXONMOBILE			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address 1901 W JEFFERSON ST			FEC Identification Number C	
City SPRINGFIELD	State IL	Zip Code 62702-2201	Amount of Each Disbursement this Period 104.53	
Purpose of Disbursement TRAVEL EXPENSE		Category/Type	Transaction ID : B78D15B734B68488DA52	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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).....▶	0.00
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 97 OF 100	
	<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)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE CONGRESSIONAL INSTITUTE			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2019	
Mailing Address 1700 DIAGONAL RD STE 730			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314-2843	Amount of Each Disbursement this Period 463.79	
Purpose of Disbursement CONFERENCE FEES		Category/ Type	Transaction ID : B6F780AB0B84A4275901	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. CHASE CARD SERVICES			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2019	
Mailing Address 270 PARK AVE			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10017-2014	Amount of Each Disbursement this Period 238.61	
Purpose of Disbursement SEE MEMO		Category/ Type	Transaction ID : BF9CC22210C1641EAAFF	
Candidate Name		Memo Item <input type="checkbox"/>		
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. MARRIOTT HOTELS			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2019	
Mailing Address 10400 FERNWOOD RD			FEC Identification Number C	
City BETHESDA	State MD	Zip Code 20817-1102	Amount of Each Disbursement this Period 238.61	
Purpose of Disbursement LODGING		Category/ Type	Transaction ID : BB365C9D8B01E498DA7B	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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).....▶	238.61
TOTAL This Period (last page this line number only).....▶	234406.86

**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 98 OF 100			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SKILLS FOR LIFE BASKETBALL ACADEMY			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2019		
Mailing Address 5901 N PROSPECT RD STE 200			FEC Identification Number C		
City PEORIA	State IL	Zip Code 61614-4337	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement DONATION		Category/ Type	Transaction ID : BE16D75B02A6E49928D3		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. ENVISION			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2019		
Mailing Address 1919 GALLOWS RD, STE 700			FEC Identification Number C		
City VIENNA	State VA	Zip Code 22182-4007	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement DONATION		Category/ Type	Transaction ID : BF6F82796E4C44278BBC		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. COSTA CATHOLIC ACADEMY			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2019		
Mailing Address 2726 COSTA DR			FEC Identification Number C		
City GALESBURG	State IL	Zip Code 61401-1234	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement DONATION		Category/ Type	Transaction ID : B4C9FBD406E154583B4F		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1750.00
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 99 OF 100	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JOHN KELLY FOR COUNCIL			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2019	
Mailing Address 445 W WOODRIDGE LN			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61614-2957	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement CONTRIBUTION(STATE/LOCAL COMMITTEE)		Category/ Type	Transaction ID : B05F232803D65492EAFD	
Candidate Name		Memo Item <input type="checkbox"/>		
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. PEORIA COUNTY REPUBLICAN WOMEN			Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2019	
Mailing Address 8835 N KNOXVILLE AVE, STE 8			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61615-1722	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type	Transaction ID : BD2327A425B6C476C9D2	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CITIZENS FOR ZACH OYLER			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2019	
Mailing Address PO BOX 10456			FEC Identification Number C	
City PEORIA	State IL	Zip Code 61612-0456	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement CONTRIBUTION(STATE/LOCAL COMMITTEE)		Category/ Type	Transaction ID : BF34354FDABD948B5B49	
Candidate Name		Memo Item <input type="checkbox"/>		
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).....▶	1500.00
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 100 OF 100			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KELLY FOR COUNCIL			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2019		
Mailing Address 445 W WOODRIDGE LANE					
City PEORIA	State IL	Zip Code 61614-2957	FEC Identification Number C		
Purpose of Disbursement CONTRIBUTION(STATE/LOCAL COMMITTEE)		Category/ Type	Amount of Each Disbursement this Period 250.00		
Candidate Name		Transaction ID : B61A17D067B534ED284F			
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) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) B. NRCC			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2019		
Mailing Address 320 FIRST ST SE					
City WASHINGTON	State DC	Zip Code 20003-1838	FEC Identification Number C C00075820		
Purpose of Disbursement CONTRIBUTION		Category/ Type	Amount of Each Disbursement this Period 15000.00		
Candidate Name NRCC		Transaction ID : B4C3EFD70E196432D8F9			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period		
Candidate Name		<input type="checkbox"/> Memo Item			
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).....▶	15250.00
TOTAL This Period (last page this line number only).....▶	18500.00