

# 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

M M / D D / Y Y Y Y

/

/

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

/

/

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
11 / 29 / 2016

/

/

through

M M / D D / Y Y Y Y  
12 / 31 / 2016

/

/

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

Noble, Kent, A, ,

Type or Print Name of Treasurer

Signature of Treasurer

Noble, Kent, A, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
01 / 31 / 2017

/

/

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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))....	7029.74	8804.74
(b) Total Contribution Refunds (from Line 20(d)) .....	25.00	75.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	7004.74	8729.74
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	49775.67	79860.30
(b) Total Offsets to Operating Expenditures (from Line 14).....	162.54	162.54
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	49613.13	79697.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	321458.87	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	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:   /   2016 To:   /   2016

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).....	3100.00	4100.00
(ii) Unitemized .....	3823.00	4198.00
(iii) TOTAL of contributions from individuals .....	6923.00	8298.00
(b) Political Party Committees.....	0.00	400.00
(c) Other Political Committees (such as PACs).....	106.74	106.74
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	7029.74	8804.74
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	1100.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	162.54	162.54
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	32.57	32.57
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	7224.85	10099.85

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 27

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	49775.67	79860.30
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 .....	25.00	75.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	25.00	75.00
21. OTHER DISBURSEMENTS .....	23000.00	23500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	72800.67	103435.30

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	387034.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7224.85
25. SUBTOTAL (add Line 23 and Line 24).....	394259.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	72800.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	321458.87

**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 27  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**LaHood for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Clark, David, , ,**

Mailing Address 1743 North Cherry St

City Galesburg State IL Zip Code 61401-1873

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

Name of Employer Self Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2016

Transaction ID : **A8D1970A0754A43F1817**

Amount of Each Receipt this Period  
300.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Maloof, J. Michael, , ,**

Mailing Address 7322 N Honeysuckle Ct

City Brimfield State IL Zip Code 61517-8900

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

Name of Employer J Maloof Realtor Occupation Realtor

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2016

Transaction ID : **A553877BB0678429FB33**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Davis, Martin, L, ,**

Mailing Address 401 Spresser St

City Taylorville State IL Zip Code 62568-1853

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

Name of Employer McDonald's Occupation franchise owner/operator

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2016

Transaction ID : **AEF78990E55184438994**

Amount of Each Receipt this Period  
300.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

**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 27  
(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)  
**Guzman, Arturo, , ,**

Mailing Address 215 Warrior Way

City: Germantown Hills State: IL Zip Code: 61548-9108

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

Name of Employer: Peoria Hofbrau Inc. Occupation: Executive

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt: 12 / 12 / 2016

Transaction ID : **AB3AA6FEC5D4B4245898**

Amount of Each Receipt this Period: 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Kies, William, , ,**

Mailing Address 1500 N Astor St Apt 8

City: Chicago State: IL Zip Code: 60610-1640

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

Name of Employer: Kies Consulitng LLC Occupation: Consultant

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt: 12 / 14 / 2016

Transaction ID : **A945E93525EB84C30B78**

Amount of Each Receipt this Period: 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Shaheen, Gerald, L, ,**

Mailing Address 119 E Pawnee Ct

City: Peoria State: IL Zip Code: 61615-9700

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

Name of Employer: None Occupation: Retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt: 12 / 26 / 2016

Transaction ID : **AD1255690BEC141118E2**

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 7 OF 27  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**LaHood for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peterson, H. Jeff, , ,**

Mailing Address 2828 Black Oak Dr

City Pekin    State IL    Zip Code 61554-7412

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

Name of Employer None    Occupation Retired

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2016

**Transaction ID : A92A3EA60A31045FF936**

Amount of Each Receipt this Period  
500.00

Memo Item

**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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 27	
	<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 AGRICULTURAL ASSOC ACTIVATOR POLITICAL INVOLVEMENT FUND**

Mailing Address PO BOX 1605

City: Bloomington      State: IL      Zip Code: 61702-1605

FEC ID number of contributing federal political committee: **C** C00193441

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 106.74

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2016

**Transaction ID : A403FF153EC8E41C8AD2**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 106.74

Memo Item  
 In-kind: Online Advertising

**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: \_\_\_\_\_

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

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 106.74
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____ 106.74



**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 9 OF 27			
	<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**

<b>A. Full Name (Last, First, Middle Initial)</b> ILLINOIS AGRICULTURAL ASSOC ACTIVATOR POLITICAL INVOLVEMENT FUND			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016		
Mailing Address PO BOX 1605					
City Bloomington	State IL	Zip Code 61702-1605	FEC Identification Number C		
Purpose of Disbursement In-kind: Online Advertising		Category/ Type	Amount of Each Disbursement this Period 106.74		
Candidate Name		Transaction ID : B403FF153EC8E41C8AD2			
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: _____					

<b>B. Full Name (Last, First, Middle Initial)</b> Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016		
Mailing Address 300 First St., S.E.					
City Washington	State DC	Zip Code 20003-1801	FEC Identification Number C		
Purpose of Disbursement Meeting Expense		Category/ Type	Amount of Each Disbursement this Period 337.15		
Candidate Name		Transaction ID : BE8C62FAE9DAE417996E			
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: _____					

<b>C. Full Name (Last, First, Middle Initial)</b> United Airlines			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016		
Mailing Address 223 S Wacker Dr					
City Chicago	State IL	Zip Code 60606	FEC Identification Number C		
Purpose of Disbursement Travel Expense		Category/ Type	Amount of Each Disbursement this Period 4.99		
Candidate Name		Transaction ID : B00797C4EE5B9400C92E			
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: _____					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	448.88
<b>TOTAL</b> 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 10 OF 27			
	<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) <b>A. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025-1456
Purpose of Disbursement Advertising	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 403.38	
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 : BEC4507FED56A4705AC1
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2016
Mailing Address 223 S Wacker Dr		FEC Identification Number C
City Chicago	State IL	Zip Code 60606
Purpose of Disbursement Airfare	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 379.60	
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 : B8995758CFC534DE9B15
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2016
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 279.43	
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 : B27C773413D764440867
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1062.41
<b>TOTAL</b> 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 11 OF 27			
	<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) <b>A. TASTE</b>		Date of Disbursement
Mailing Address 1600 Fitzgerald Ln		M M / D D / Y Y Y Y 12 / 02 / 2016
City Alexandria	State VA	Zip Code 22302-2004
Purpose of Disbursement Event Catering	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 996.93	
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:	Transaction ID : BE6BAA30C6EF447B5883 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CEFCU</b>		Date of Disbursement
Mailing Address PO Box 1715		M M / D D / Y Y Y Y 12 / 02 / 2016
City Peoria	State IL	Zip Code 61656-1715
Purpose of Disbursement Campaign Vehicle	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 748.97	
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:	Transaction ID : B9D1EE865D3D149F68FC <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. The Dawson</b>		Date of Disbursement
Mailing Address 730 W Grand Ave		M M / D D / Y Y Y Y 12 / 05 / 2016
City Chicago	State IL	Zip Code 60654-5508
Purpose of Disbursement Meeting Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 349.37	
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:	Transaction ID : B41431FA8B3A848659BB <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2095.27
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27			
	<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) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2016
Mailing Address 6310 N University St		FEC Identification Number C
City Peoria	State IL	Zip Code 61614-3483
Purpose of Disbursement Postage	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 2820.00	
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) ▼	
State: District:	Transaction ID : BF0DA6B0D2C3B4825AFF	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. White House Historical Association</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2016
Mailing Address 1610 H St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20006-4907
Purpose of Disbursement Donor Gifts-Ornaments	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 967.45	
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:	Transaction ID : B570B54FFEDA44FC5BA2	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Peoria County Republican Central Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2016
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	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 300.91	
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:	Transaction ID : BB6BC52ABA1D741FBB64	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4088.36
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 27	
	<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) <b>A. Chicago Athletic Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2016	
Mailing Address 12 S Michigan Ave			FEC Identification Number C	
City Chicago	State IL	Zip Code 60603-3300	Amount of Each Disbursement this Period 582.58	
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : BFFB647819E704BB78BF	
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>B. The Voyageur Company, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2016	
Mailing Address 1151 Orchard Circle			FEC Identification Number C	
City Saint Paul	State MN	Zip Code 55118-4146	Amount of Each Disbursement this Period 4902.62	
Purpose of Disbursement Direct Mail Production/Postage		Category/ Type	Transaction ID : BD8A64912B755439DB2D	
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>C. Illinois State Society</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2016	
Mailing Address PO Box 320776			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22320-4776	Amount of Each Disbursement this Period 1260.00	
Purpose of Disbursement Event Tickets/Membership Dues		Category/ Type	Transaction ID : BD2CE6002BC94460BA3A	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6745.20
<b>TOTAL</b> 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 14 OF 27			
	<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) <b>A. Hodas &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2016		
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 5000.00		
Purpose of Disbursement Direct Marketing		Category/Type	Transaction ID : BC60AC1EB2333414DBE3		
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>B. Amtrak</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2016		
Mailing Address 60 Massachusetts Ave NE			FEC Identification Number C		
City Washington	State DC	Zip Code 20002-4285	Amount of Each Disbursement this Period 309.00		
Purpose of Disbursement Train Fare		Category/Type	Transaction ID : B361B90DC1F534C979B6		
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>c. Murphy Law Office</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2016		
Mailing Address 414 5th St			FEC Identification Number C		
City Lacon	State IL	Zip Code 61540-1212	Amount of Each Disbursement this Period 350.00		
Purpose of Disbursement Legal Fees		Category/Type	Transaction ID : B65A5AB864C0E4B090D		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5659.00
<b>TOTAL</b> 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 15 OF 27	
	<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) <b>A. Bertschy, Austin, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2016	
Mailing Address 1800 W Marigold Dr #7110			FEC Identification Number C	
City Peoria	State IL	Zip Code 61615-7260	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Intern Payment		Category/Type	Transaction ID : BCF6D2CF5CE194A05921	
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>B. Rauber, John, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2016	
Mailing Address 11801 Hunting Ct			FEC Identification Number C	
City Potomac	State MD	Zip Code 20854	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Intern Payment		Category/Type	Transaction ID : B66B3AC1B74244398A25	
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>c. United Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2016	
Mailing Address 223 S Wacker Dr			FEC Identification Number C	
City Chicago	State IL	Zip Code 60606	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement Travel Expense		Category/Type	Transaction ID : B94EDBE11F5C14F7FA3A	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2525.00
<b>TOTAL</b> 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 16 OF 27			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**LaHood for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2016
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 733.54
Candidate Name		Transaction ID : BECCF979BEEC34447A43
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>B. Acqua AI 2</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2016
Mailing Address 212 7th Street SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4311
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 72.50
Candidate Name		Transaction ID : BF3D598EF8AA845E8A60
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>c. Best Buy</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016
Mailing Address 5001 N Big Hollow Rd		FEC Identification Number C
City Peoria	State IL	Zip Code 61615-3538
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 847.98
Candidate Name		Transaction ID : B2844C7F6686C4442AFB
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1654.02
<b>TOTAL</b> 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 17 OF 27			
	<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) <b>A. Ocean Prime</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016
Mailing Address 123 W 52nd St		FEC Identification Number C
City New York	State NY	Zip Code 10019-6003
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 240.00
Candidate Name		Transaction ID : B0A22EDE8D2B54CDD8E3
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>B. Trattoria Il Mulino</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016
Mailing Address 36 E 20th St		FEC Identification Number C
City New York	State NY	Zip Code 10003-1315
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 217.80
Candidate Name		Transaction ID : BA4AEA2304D4D4E7EBCD
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>C. Del Frisco's</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016
Mailing Address 1221 Ave of the Americas		FEC Identification Number C
City New York	State NY	Zip Code 10020-1001
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 152.56
Candidate Name		Transaction ID : BE5D303E9F63749EFB0E
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	610.36
<b>TOTAL</b> 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 18 OF 27	
	<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) <b>A. Westin Hotels</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016
Mailing Address 1 Star Point		FEC Identification Number C
City Stamford	State CT	Zip Code 06902-8911
Purpose of Disbursement Lodging	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 730.44	
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 : <b>BF74F38EB64054A338A2</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Professional Data Services, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016
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 1881.28	
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 : <b>B851E955597BA4AB7819</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 4333 Amon Carter Blvd.		FEC Identification Number C
City Ft Worth	State TX	Zip Code 76155-2605
Purpose of Disbursement Travel Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 50.00	
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 : <b>B181C5261463244BC830</b>
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2661.72
<b>TOTAL</b> 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 19 OF 27			
	<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) <b>A. Lotte New York Palace</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016		
Mailing Address 455 Madison AVE					
City New York	State NY	Zip Code 10022-6845	FEC Identification Number C		
Purpose of Disbursement Lodging		Category/ Type	Amount of Each Disbursement this Period 1465.30		
Candidate Name		Transaction ID : B4C173D64513E40F19E8			
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>B. Lotte New York Palace</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016		
Mailing Address 455 Madison AVE					
City New York	State NY	Zip Code 10022-6845	FEC Identification Number C		
Purpose of Disbursement Meeting Expense		Category/ Type	Amount of Each Disbursement this Period 135.99		
Candidate Name		Transaction ID : BAB8246D1828C41CCA35			
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>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2016		
Mailing Address 300 First St., S.E.					
City Washington	State DC	Zip Code 20003-1801	FEC Identification Number C		
Purpose of Disbursement Meeting Expense		Category/ Type	Amount of Each Disbursement this Period 780.88		
Candidate Name		Transaction ID : B549CFDB1DBA54693BD5			
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: _____					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2382.17
<b>TOTAL</b> 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 20 OF 27	
	<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) <b>A. Law Office of Patrick Murphy</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address 414 Fifth St			FEC Identification Number C	
City Lacon	State IL	Zip Code 61540-1212	Amount of Each Disbursement this Period 350.00	
Purpose of Disbursement Legal Fees		Category/ Type	Transaction ID : B4D566FC5313D43B8A1B	
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>B. ExxonMobile</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2016	
Mailing Address 1901 W Jefferson			FEC Identification Number C	
City Springfield	State IL	Zip Code 62702-2201	Amount of Each Disbursement this Period 31.51	
Purpose of Disbursement Travel Expense		Category/ Type	Transaction ID : BC877DC2013264F4E94B	
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>c. Mt. Hawley Country Club</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2016	
Mailing Address 7724 N Knoxville Ave			FEC Identification Number C	
City Peoria	State IL	Zip Code 61614-2026	Amount of Each Disbursement this Period 605.14	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B5FAFA0E6D4F9478388E	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	986.65
<b>TOTAL</b> 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 21 OF 27	
	<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) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2016
Mailing Address PO Box 30844		FEC Identification Number C
City Bethesda	State MD	Zip Code 20824-0844
Purpose of Disbursement Event Tickets/Lodging		Amount of Each Disbursement this Period 1436.00
Candidate Name		Transaction ID : <b>BDDE55ACE5505455382E</b>
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>B. ExxonMobile</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2016
Mailing Address 1901 W Jefferson		FEC Identification Number C
City Springfield	State IL	Zip Code 62702-2201
Purpose of Disbursement Travel Expense		Amount of Each Disbursement this Period 36.63
Candidate Name		Transaction ID : <b>BF9986F459B2349DF889</b>
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>c. Targeted Creative Communications, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2016
Mailing Address 106 S Columbus St		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-3036
Purpose of Disbursement Direct Mail Production		Amount of Each Disbursement this Period 794.79
Candidate Name		Transaction ID : <b>B3DCA3E90DBDB4EB5ACC</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2267.42
<b>TOTAL</b> 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 22 OF 27	
	<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) <b>A. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016
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 600.00	
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 : B23F8B001876B43799DC
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. 814 Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016
Mailing Address 5827 Colfax Ave		FEC Identification Number C
City Alexandria	State VA	Zip Code 22311-1013
Purpose of Disbursement Fundraising Consulting	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 4044.39	
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 : B42E52692E1B54A4DBE0
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Captain Curt's</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016
Mailing Address 1200 Old Stickney Point Rd		FEC Identification Number C
City Sarasota	State FL	Zip Code 34242-3407
Purpose of Disbursement Meeting Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 496.76	
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 : BC3951B1B31254B67A07
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5141.15
<b>TOTAL</b> 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 23 OF 27			
	<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) <b>A. Peoria County Republican Central Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016		
Mailing Address 8835 N Knoxville Ave.			FEC Identification Number C		
City Peoria	State IL	Zip Code 61615-1722	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Membership Dues		Category/ Type	Transaction ID : BD7E63710D81F450DAD2		
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>B. BKZ Consulting, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016		
Mailing Address PO Box 577832			FEC Identification Number C		
City Chicago	State IL	Zip Code 60657-7340	Amount of Each Disbursement this Period 8000.00		
Purpose of Disbursement Fundraising Consulting		Category/ Type	Transaction ID : BC240846A464B4A36BB9		
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>C. CVS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2016		
Mailing Address 1 CVS Dr			FEC Identification Number C		
City Woonsocket	State RI	Zip Code 02895-6146	Amount of Each Disbursement this Period 767.85		
Purpose of Disbursement Event Supplies		Category/ Type	Transaction ID : B80E81008F992435F95F		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9267.85
<b>TOTAL</b> 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 24 OF 27	
	<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) <b>A. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016
Mailing Address 1 ADP Blvd.		FEC Identification Number C
City Roseland	State NJ	Zip Code 07068-1728
Purpose of Disbursement Payroll Fees		Amount of Each Disbursement this Period 89.39
Candidate Name		Transaction ID : B5D250295D0F54EBDAB4
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>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		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: _____	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	89.39
<b>TOTAL</b> This Period (last page this line number only).....▶	47684.85



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 27
	<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) <b>A. OSF Saint Francis Foundation</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016
Mailing Address 530 NE Glen Oak Ave		FEC Identification Number C
City Peoria	State IL	Zip Code 61637-0001
Purpose of Disbursement Donation		Amount of Each Disbursement this Period 500.00
Candidate Name	Category/Type	Transaction ID : BBDBDF2F5A27D4DAB873
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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) <b>B. BRIAN FITZPATRICK FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016
Mailing Address PO BOX 939		FEC Identification Number C C00607416
City LANGHORNE	State PA	Zip Code 19047
Purpose of Disbursement Debt Retirement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name Fitzpatrick, Brian, , ,	Category/Type	Transaction ID : B4E3BE27639A44630909
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA District: 08		

Full Name (Last, First, Middle Initial) <b>C. BERGMANFORCONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016
Mailing Address N5070 CISCO LAKE ROAD		FEC Identification Number C C00614214
City WATERSMEET	State MI	Zip Code 49969
Purpose of Disbursement Debt Retirement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name Bergman, John, , ,	Category/Type	Transaction ID : BB713AE4453974CA09A6
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MI District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 27	
	<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) <b>A. Citizens for Disharoon</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2016	
Mailing Address 708 S Sara Ct			FEC Identification Number C	
City Dunlap	State IL	Zip Code 61525-9635	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution(State/Local Committee)		Category/ Type	Transaction ID : B41EDCB42DCF34FC59D4	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. McLean County GOP</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2016	
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 Contribution(State/Local Committee)		Category/ Type	Transaction ID : B1E09892C6BD140C8A82	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. NRCC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address 320 First St SE			FEC Identification Number C C00075820	
City Washington	State DC	Zip Code 20003-1838	Amount of Each Disbursement this Period 15000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : B29ED824145764183986	
Candidate Name <b>NRCC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	17000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 27	
	<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) <b>A. MIKE GALLAGHER FOR WISCONSIN</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2016	
Mailing Address PO BOX 1027			FEC Identification Number C C00610212	
City GREEN BAY	State WI	Zip Code 54305	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Debt Retirement Contribution		Category/ Type	Transaction ID : BF4B77D82EF56416B883	
Candidate Name <b>Gallagher, Michael, John, ,</b>		Disbursement For: 2016		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 08		<input type="checkbox"/> Memo Item	
			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends to Elect Dan Sullivan</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2016	
Mailing Address PO Box 5888			FEC Identification Number C	
City Peoria	State IL	Zip Code 61601-5888	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Contribution(State/Local Committee)		Category/ Type	Transaction ID : BFDE5E2C720BD4937811	
Candidate Name		Disbursement For: 2018		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		<input type="checkbox"/> Memo Item	
			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
Candidate Name		Disbursement For:		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		<input type="checkbox"/> Memo Item	
			<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	23000.00