

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Attorneys' Title Guaranty Fund, Inc. Federal Political Action Committee

ADDRESS (number and street) 2102 Windsor Place

Check if different than previously reported. (ACC) Champaign IL 61820-7758

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00301424

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
  - Convention (12C)  Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 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] 07 / 01 / 2013 through [MM] / [DD] / [YYYY] 12 / 31 / 2013

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

Type or Print Name of Treasurer Mr. Michael K. Brandt

Signature of Treasurer Mr. Michael K. Brandt [Electronically Filed] Date 01 / 02 / 2014

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Attorneys' Title Guaranty Fund, Inc. Federal Political Action Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="4741.00"/>	<input type="text" value="4741.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="21529.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5979.00"/>	<input type="text" value="22829.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="27508.00"/>	<input type="text" value="27570.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11000.00"/>	<input type="text" value="11062.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="16508.00"/>	<input type="text" value="16508.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Attorneys' Title Guaranty Fund, Inc. Federal Political Action Committee**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2550.00	15125.00
(ii) Unitemized .....	3429.00	7628.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5979.00	22753.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5979.00	22753.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	76.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5979.00	22829.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5979.00	22829.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	62.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	62.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	11000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11000.00	11062.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11000.00	11062.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5979.00	22753.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5979.00	22753.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	62.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	76.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	-14.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Attorneys' Title Guaranty Fund, Inc. Federal Political Action Committee**

**A. Aurora A. Austriaco**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 North Michigan Ave.  
 #2700  
 City Chicago State IL Zip Code 60601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Clark Hill PLC Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2013  
**Transaction ID : SA11AI.4637**  
 Amount of Each Receipt this Period  
**500.00**

**B. Richard J. Caldrazzo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Trans Am Plaza Drive  
 Suite 440  
 City Oak Brook Terrace State IL Zip Code 60181  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer East-West Home Title, Inc. Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : SA11AI.4577**  
 Amount of Each Receipt this Period  
**500.00**

**C. Dan M. Collander**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 N Birchwood Dr.  
 City Naperville State IL Zip Code 60540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : SA11AI.4571**  
 Amount of Each Receipt this Period  
**500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Attorneys' Title Guaranty Fund, Inc. Federal Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Michael J. Cornfield**

Mailing Address 6153 N. Milwaukee Ave.

City Chicago State IL Zip Code 60646

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

Name of Employer McParland & Cornfield Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : SA11AI.4595**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Steven K. Norgaard**

Mailing Address 493 Duane St. #400

City Glen Ellyn State IL Zip Code 60137

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

Name of Employer Self Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : SA11AI.4612**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Mark Rodriguez**

Mailing Address 364 Pennsylvania

City Glen Ellyn State IL Zip Code 60137

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

Name of Employer Self Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : SA11AI.4656**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2550.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Attorneys' Title Guaranty Fund, Inc. Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. L. TAMMY DUCKWORTH**

Mailing Address 1800 BOLLEANA COURT

City State Zip Code  
HOFFMAN ESTATES IL 60192

Purpose of Disbursement

011

Candidate Name

**L. TAMMY DUCKWORTH**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 08

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2013

**Transaction ID : SB23.4645**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. ERIKA NATALI LOUISE HAROLD**

Mailing Address 115 E HOLMES

City State Zip Code  
URBANA IL 61801

Purpose of Disbursement

011

Candidate Name

**ERIKA NATALI LOUISE HAROLD**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2013

**Transaction ID : SB23.4649**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. RANDY HULTGREN**

Mailing Address 1S651 VERDUN DRIVE

City State Zip Code  
WINFIELD IL 60190

Purpose of Disbursement

011

Candidate Name

**RANDY HULTGREN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 14

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2013

**Transaction ID : SB23.4643**

Amount of Each Disbursement this Period

2500.00

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

7500.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Attorneys' Title Guaranty Fund, Inc. Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ROBIN L KELLY**

Mailing Address 4203 CEDARWOOD LANE

City MATTESON State IL Zip Code 60443

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**ROBIN L KELLY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2013

**Transaction ID : SB23.4647**

Amount of Each Disbursement this Period

2500.00
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Full Name (Last, First, Middle Initial)

**B. BRAD SHERMAN**

Mailing Address 4570 VAN NUYS BLVD., #270

City SHERMAN OAKS State CA Zip Code 94103

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**BRAD SHERMAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 30

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	18	/	2013

**Transaction ID : SB23.4641**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

3500.00
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**TOTAL** This Period (last page this line number only)..... ▶

11000.00
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