

# REPORT OF RECEIPTS AND DISBURSEMENTS

**COPY**

For An Authorized Committee  
(Summary Page)

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U.S. HOUSE OF REPRESENTATIVES

1994 AUG -1 AM 11:53

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

HAND DELIVERED

1. NAME OF COMMITTEE (in full)  
Reynolds for Congress

ADDRESS (number and street)  Check if different than previously reported.  
P.O. Box 368217

CITY, STATE and ZIP CODE Chicago Illinois 60636 STATE/DISTRICT IL/2

2. FEC IDENTIFICATION NUMBER  
002451 **133639**

3. IS THIS REPORT AN AMENDMENT?  
 YES  NO

### 4. TYPE OF REPORT

April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid-Year Report (Non-election Year Only)

Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_

Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

Termination Report

This report contains activity for  Primary Election  General Election  Special Election  Runoff Election

### SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>4-1-94</u> through <u>7-15-94</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	<u>33,785.00</u>	<u>157,120.00</u>
(b) Total Contribution Refunds (from Line 20(d))	<u>-0-</u>	<u>-0-</u>
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	<u>33,785.00</u>	<u>157,120.00</u>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<u>28,204.33</u>	<u>223,262.59</u>
(b) Total Offsets to Operating Expenditures (from Line 14)	<u>-0-</u>	<u>-0-</u>
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	<u>28,204.33</u>	<u>223,262.59</u>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<u>11,474.37</u>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<u>-0-</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<u>13,474.32</u>	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-376-3120

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  
Ella Stanton

Signature of Treasurer  
Ella Stanton

Date  
7-12-94

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

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**FEC FORM 3**  
(revised 4/87)

**DETAILED SUMMARY PAGE**  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)

Name of Committee (in full) **REYNOLDS FOR CONGRESS** Report Covering the Period:  
From: **4-1-94** To: **7-15-94**

<b>I. RECEIPTS</b>		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>				
<b>(a) Individuals/Persons Other Than Political Committees</b>				
(i) Itemized (use Schedule A)		3,000.00		11(a)(i)
(ii) Unitemized		1,535.00		11(a)(ii)
(iii) Total of contributions from individuals		4,535.00	42,411.00	11(a)(iii)
<b>(b) Political Party Committees</b>		250.00	1,250.00	11(b)
<b>(c) Other Political Committees (such as PACs)</b>		23,500.00	108,459.10	11(c)
<b>(d) The Candidate</b>		-0-	-0-	11(d)
<b>(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))</b>		33,285.00	157,120.00	11(e)
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>		-0-	-0-	12
<b>13. LOANS:</b>				
(a) Made or Guaranteed by the Candidate		-0-	-0-	13(a)
(b) All Other Loans		-0-	-0-	13(b)
(c) TOTAL LOANS (add 13(a) and (b))		-0-	-0-	13(c)
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>		-0-	-0-	14
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>		-0-	-0-	15
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>		33,285.00	157,120.00	16
<b>II. DISBURSEMENTS</b>				
<b>17. OPERATING EXPENDITURES</b>		28,204.33	773,762.59	17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		-0-	-0-	18
<b>19. LOAN REPAYMENTS:</b>				
(a) Of Loans Made or Guaranteed by the Candidate		-0-	2,600.00	19(a)
(b) Of All Other Loans		-0-	-0-	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		-0-	2,600.00	19(c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>				
(a) Individuals/Persons Other Than Political Committees		-0-	-0-	20(a)
(b) Political Party Committees		-0-	-0-	20(b)
(c) Other Political Committees (such as PACs)		-0-	-0-	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		-0-	-0-	20(d)
<b>21. OTHER DISBURSEMENTS</b>		-0-	-0-	21
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>		28,204.33	225,862.59	22

<b>III. CASH SUMMARY</b>			
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>		\$ 6,343.70	23
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>		\$ 33,285.00	24
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>		\$ 39,628.70	25
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>		\$ 28,204.33	26
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>		\$ 11,424.37	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 13 FOR LINE NUMBER

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)

Reynolds for Congress

SCHEDULE A

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jay Reinsdorf 900 N. Michigan Avenue Chicago, Illinois 60611	White Sox Occupation Cainer Aggregate Year-to-Date > \$	5-29-94	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Suzanne G. Goodman 222 N. LaSalle Street Chicago, Illinois 60601	Attorney Occupation Aggregate Year-to-Date > \$	6-29-94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maxine Leftwich Chicago, Illinois	Investment Broker Occupation Self-Employed Aggregate Year-to-Date > \$	6-20-94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert M. Leone 30 W. Monroe Street Chicago, Illinois 60603	Executive Occupation Inland Steel Co. Aggregate Year-to-Date > \$	6-20-94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Denise Washington 1156 N. Lake Shore Drive Chicago, Illinois 60611	Self-Employed Occupation Business Aggregate Year-to-Date > \$	6-20-94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bradford L. Ferguson 82 East Elm Chicago, Illinois 60611	Attorney Occupation Hopkins & Sutter Aggregate Year-to-Date > \$	6-17-94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas M. Ryan 5925 Selwyn Terrace Bethesda, MD 20816	Self-Employed Occupation U.S. Messenger Aggregate Year-to-Date > \$	7-13-94	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) ..... 3500.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 13 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Reynolds for Congress

OFFICE OF THE CLERK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norman R. Bobins 179 E. Lake Shore Drive Chicago, Illinois 60611	Attorney	5-27-94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
Rebecca E. Crown 17 Woodley Road Winnetka, Illinois 60093	Educator	6-29-94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-Employed	Aggregate Year-to-Date > \$	
Michael Rosenberg Chicago, Illinois	Attorney	6-3-94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
Martin J. Koldyke 207 Chamberland Kenilworth, Illinois 60043	"Best Efforts"	4-25-94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Businessman	Aggregate Year-to-Date > \$	
Lester Crown 222 N. LaSalle Street Chicago, Illinois 60601	President	6-21-94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Henry Crown Co.	Aggregate Year-to-Date > \$	
Mrs Robert Crown 33 Canterbury Court Wilmette, Illinois 60091	Retired	6-29-94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
Christie Hefner 630 N. Lake Shore Drive Chicago, Illinois 60611	Executive	6-16-94	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Planning Enterprises	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) ..... 2,750.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF  
3 13  
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Reynolds For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert A. Pritzker 225 W. Washington Chicago, Illinois 60606 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Habitat For America Occupation: President Aggregate Year-to-Date > \$	4-28-94	1,000.00
Henry Shapiro 480 N. Michigan Avenue Chicago, Illinois 60611 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney Occupation: SELF-EMPLOYED Aggregate Year-to-Date > \$	4-28-94	500.00
Howard L. Stone 305 Wacker Drive Chicago, Illinois 60606 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Pritzker, Melvin + ... Occupation: Attorney Aggregate Year-to-Date > \$	6-6-94	250.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ..... 1,750.00  
 TOTAL This Period (last page this line number only) ..... 8,000.00

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

*Reynolds for Congress*

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Citizens For Gary J. LaFaille P.O. Box 3860 Chicago, Illinois 60654</i>	<i>Political Committee</i>	<i>6-20-94</i>	<i>250.00</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>State Senator</i>	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) ..... *250.00*

TOTAL This Period (last page this line number only) ..... *250.00*

2025 RELEASE UNDER E.O. 14176

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 1 OF 15 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Reynolds for Congress

A. Full Name, Mailing Address and ZIP Code  
Northern Illinois Gas / NICOR PAC  
P.O. Box 3014  
Naperville, Illinois 60566-7014

Name of Employer  
PAC  
Occupation

Date (month, day, year)  
6-20-63

Amount of Each Receipt this Period  
250.00

Receipt For:  Primary  General

Aggregate Year-to-Date > \$

B. Full Name, Mailing Address and ZIP Code  
American Crystal Sugar PAC  
101 North Third Street  
Marhead, MN 56560

Name of Employer  
PAC  
Occupation

Date (month, day, year)  
6-28-94

Amount of Each Receipt this Period  
1,000.00

Receipt For:  Primary  General

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code  
Wmix PAC  
3003 Butterfield Road  
Oak Brook, Illinois 60521

Name of Employer  
PAC  
Occupation

Date (month, day, year)  
6-15-94

Amount of Each Receipt this Period  
1,000.00

Receipt For:  Primary  General

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code  
Price Water Partners PAC  
1301 K Street NW  
Washington, D.C. 20006

Name of Employer  
PAC  
Occupation

Date (month, day, year)  
5-26-94

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code  
Zenith Electronic Corp PAC  
1900 N Austin Avenue  
Chicago, Illinois 60639

Name of Employer  
PAC  
Occupation

Date (month, day, year)  
6-1-94

Amount of Each Receipt this Period  
1,000.00

Receipt For:  Primary  General

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code  
Kids PAC  
80 Trowbridge Street  
Cambridge MA 02138

Name of Employer  
PAC  
Occupation

Date (month, day, year)  
2-25-94

Amount of Each Receipt this Period  
1,000.00

Receipt For:  Primary  General

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code  
AFLAC Incorporated PAC  
AFLAC Center  
Columbus GA 31999

Name of Employer  
PAC  
Occupation

Date (month, day, year)  
3-24-94

Amount of Each Receipt this Period  
1,000.00

Receipt For:  Primary  General

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

5,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 2 OF 15 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Reynolds for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ELA Lease PAC 1300 N. 17th Street Arlington, VA 22209 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation	6-3-94	1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Certified Public Accountants PAC Chicago, Illinois Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation	5-27-94	250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tennis Corporation of America 2020 W Fullerton Chicago, Illinois 60647 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation	6-10-94	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFGE PAC 80 F Street NW Washington D.C. 20001 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation	6-16-94	1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lone Truck Industries PAC 1200 Sherman Road Northbrook, Illinois 60067 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation	6-16-94	1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Natl Emergency Medicine PAC P.O. Box 60911 Dallas, Texas 75261 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation	6-23-94	1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Blue Cross Blue Shield Assoc 1310 G Street NW Washington, D.C. 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation	6-27-94	1,000.00

SUBTOTAL of Receipts This Page (optional)

5,500.00

TOTAL This Period (last page this line number only)



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PAGE 3 OF 15 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Reynolds for Congress

UNITED STATES SENATE

A. Full Name, Mailing Address and ZIP Code Investment Mgmt PAC Chicago, Illinois Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5-11-94	Amount of Each Receipt this Period 1,500.00
B. Full Name, Mailing Address and ZIP Code Pfizer PAC 235 East 42nd Street New York, New York 10017 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5-10-94	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Kirkland + Ellis PAC 200 East Randolph Street Chicago, Illinois 60601 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5-3-94	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Goldman Sacks Partners PAC 1101 Penn Ave Washington, D.C. 20004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4-28-94	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Price Waterhouse Partners PAC 1501 K Street NW Washington D.C. 20006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5-26-94	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Zenith Electronic Corp PAC 1400 North Austin Chicago, Illinois 60639 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6-1-94	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Association of Trial Lawyers PAC 1050 31st Street NW Washington, D.C. 20007 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 6-24-94	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 15 FOR LINE NUMBER

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)

Reverends For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mid Con Corp PAC 701 East 22nd Street Lombard, Illinois 60148	PAC	6-15-94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code Carpenters Legislative Committee PAC 17 East Erie Street Chicago, Illinois 60611	PAC	4-25-94	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Transportation Political Education 14600 Detroit Avenue Cleveland, Ohio 44107	PAC	5-31-94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code Nat'l League of Retirees 1023 North Royal Street Alexandria, VA 22314	PAC	6-6-94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Transport Workers Union PAC 80 West End Avenue New York, NY 10023	PAC	6-9-94	1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code ASA PAC 520 N. Northwest Highway Park Ridge, Illinois 60068	PAC	6-1-94	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code ACME Steel Company PAC 13500 S. Perry Avenue Riverdale, Illinois 60627	PAC	6-1-94	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) ..... 5,750.00

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

SCHEDULE C

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 15 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Reynolds for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Assoc for the Advancement of Psycho. P.O. Box 38129 Colorado Springs, CO 80937 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation Aggregate Year-to-Date > \$	6-2-94	1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) .....	1,000.00
TOTAL This Period (last page this line number only) .....	24,500.00

2025 RELEASE UNDER E.O. 14176

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 13 OF 17 FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Reynolds for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ameritech P.O. Box 2605 Bedford Park, Illinois 60499	Telephone Service	4-19-94	375.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-17-94	410.00
Ameritech P.O. Box 2605 Bedford Park, Illinois 60499	Telephone Service	6-7-94	280.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Northern Illinois Gas Glenwood, Illinois	Utility	6-1-94	979.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Washington Park Associates 9933 N. Lawler Avenue Skokie, Illinois 60077	Campaign Rent	4-1-94	1,000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-94	1,000.00
Instant Printing Chicago, Illinois 606	Printing	6-1-94	620.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-7-94	210.00
Martino Paper Company 744 E. 113th Street Chicago, Illinois 60628	Paper	5-7-94	279.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-11-94	310.82
U.S. Post Office 1400 S. Jefferson Chicago, Illinois 60607	Postage	6-1-94	463.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-8-94	200.00
Xerox Company 55 West Jackson Blvd. Chicago, Illinois 60603	Office Equipment	6-12-94	1,000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Zulma Zamora 16701 S. Avenue J Chicago, Illinois 60639	Consultant	6-15-94	600.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-15-94	600.00

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

8,326.82

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

Reynolds for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Zulma Zamora 10701 S. Avenue J Chicago, Illinois 60639	Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-94 6-1-94	600.00 600.00
B. Full Name, Mailing Address and ZIP Code Mike H. Keenan Associates Chicago, Illinois	Campaign Polling Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-20-94 7-12-94	1,000.00 3,500.00
C. Full Name, Mailing Address and ZIP Code John Reynolds 17452 S. Halsted Homewood, Illinois 60436	Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-94 6-1-94	600.00 600.00
D. Full Name, Mailing Address and ZIP Code John Reynolds 17452 S. Halsted Homewood, Illinois 60436	Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-1-94 4-15-94	600.00 600.00
E. Full Name, Mailing Address and ZIP Code Elia Stanton 9546 S. Beverly Chicago, Illinois 60619	Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-15-94 6-15-94	300.00 300.00
F. Full Name, Mailing Address and ZIP Code Elia Stanton 9546 S. Beverly Chicago, Illinois 60619	Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-1-94 5-1-94	300.00 300.00
G. Full Name, Mailing Address and ZIP Code Ernest Travis 7626 S. Racine Chicago, Illinois 60628	Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-1-94 5-1-94	1,050.00 1,000.00
H. Full Name, Mailing Address and ZIP Code Misc.	Food Gas Paper, Etc Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-94 6-9-94	727.93 426.58
I. Full Name, Mailing Address and ZIP Code Mansel Concepcion 7425 S. Shore Drive Chicago, Illinois 60649	Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-1-94 6-1-94	2,500.00 2,500.00

SUBTOTAL of Disbursements This Page (optional) ..... 17,504.51

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

ST-CR-FRM-CPND

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Reynolds for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Post Office 1400 S. Jefferson Chicago, Illinois 60607	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-12-94	173.00
John Reynolds 17152 S. Halsted Homewood, Illinois 60430	Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-15-94 6-15-94	600.00 600.00
Washington Park Associates 9933 Lawler Avenue Skokie, Illinois 60079	Campaign Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-1-94	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

S-C-A-M-P

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

2,373.00

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

28,204.35

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Page 1 of 1 for  
LINE NUMBER \_\_\_\_\_  
(Use separate schedules  
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<b>Reynolds for Congress</b>				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor W.W. Mailing Consultants 419 S. Jefferson Avenue Chicago, Illinois 60607	4,000.00	- 0 -	- 0 -	4,000.00
Nature of Debt (Purpose): Campaign Mailing Printing				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Tele Mail Marketing Corporation 222 Volmer Road Chicago Heights, Illinois 60411	4,250.35	- 0 -	- 0 -	4,250.35
Nature of Debt (Purpose): Phone Banking				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mike McKern Associates Chicago, Illinois	4,500.00	- 0 -	4,500.00	- 0 -
Nature of Debt (Purpose): Campaign Printing				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Axton Corporation, CBOT 141 West Jackson Blvd Chicago, Illinois 60601	1,910.00	- 0 -	- 0 -	1,910.00
Nature of Debt (Purpose): Catering				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Impressive Communications 5005 Closter Drive Hedville, MD 20852	1,268.97	- 0 -	- 0 -	1,268.97
Nature of Debt (Purpose): Campaign Printing				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Chicago Merchantile Exchange 30 South Wacker Drive Chicago, Illinois 60606	2,000.00	- 0 -	- 0 -	2,000.00
Nature of Debt (Purpose): Room Rental				
1) SUBTOTALS This Period This Page (optional) .....				
2) TOTAL This Period (last page this line only) .....				13,429.32
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) .....				13,429.32