

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 BMO Harris Bank N.A. Government Affairs Fund

ADDRESS (number and street) 111 W. Monroe P.O. Box 755 Chicago IL 60603 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00086256 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 09 / 01 / 2016 through 09 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Jenkins, Carl, , , Type or Print Name of Treasurer

Signature of Treasurer Jenkins, Carl, , , [Electronically Filed] Date 03 / 23 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

BMO Harris Bank N.A. Government Affairs Fund

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="2016"/>		99498.63
(b) Cash on Hand at Beginning of Reporting Period.....	65774.63	
(c) Total Receipts (from Line 19)	1036.00	13312.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	66810.63	112810.63
7. Total Disbursements (from Line 31).....	5500.00	51500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	61310.63	61310.63
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

BMO Harris Bank N.A. Government Affairs Fund

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	948.00	8262.00
(ii) Unitemized	88.00	5050.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1036.00	13312.00
(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)	1036.00	13312.00
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	0.00
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)).....▶	1036.00	13312.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1036.00	13312.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5500.00	51500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	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)) ..	5500.00	51500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5500.00	51500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1036.00	13312.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1036.00	13312.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This report is being amended because the previous report was amended and it changed the Cash On Hand.

Form/Schedule:
Transaction ID:

**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 17
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	11c
		<input type="checkbox"/>	12
		<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)
BMO Harris Bank N.A. Government Affairs Fund

A. Cadorin, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 N Water St
 City Milwaukee State WI Zip Code 53202-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMO Harris Bank N.A. Occupation (for Individual) Dir Employee Communication
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1680.00

Date of Receipt 09 / 09 / 2016
Transaction ID : 20160906105130-34
 Amount of Each Receipt this Period 84.00
 Memo Item

B. Cadorin, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 N Water St
 City Milwaukee State WI Zip Code 53202-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMO Harris Bank N.A. Occupation (for Individual) Dir Employee Communication
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1680.00

Date of Receipt 09 / 23 / 2016
Transaction ID : 2016092085325-40
 Amount of Each Receipt this Period 84.00
 Memo Item

C. Cardimen, Andrew, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 N Pennsylvania St
 City Indianapolis State IN Zip Code 46204-2400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMO Harris Bank N.A. Occupation (for Individual) US MD Commercial Banking CQ
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2016
Transaction ID : 20160906105130-16
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 193.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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NAME OF COMMITTEE (In Full)
BMO Harris Bank N.A. Government Affairs Fund

A. Cardimen, Andrew, Michael, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 135 N Pennsylvania St

City Indianapolis	State IN	Zip Code 46204-2400
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) US MD Commercial Banking CQ
---	--

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
09		23		2016

Transaction ID : 2016092085325-21

Amount of Each Receipt this Period
25.00

Memo Item

B. Duff, James, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 W Monroe St

City Chicago	State IL	Zip Code 60603-4096
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) SVP & Head BB Credit Risk
---	--

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
09		09		2016

Transaction ID : 20160906105130-12

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 111 W Monroe St

City Chicago	State IL	Zip Code 60603-4096
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) SVP & Head BB Credit Risk
---	--

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
09		23		2016

Transaction ID : 2016092085325-16

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BMO Harris Bank N.A. Government Affairs Fund

A. Ferris, Scott, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 W Monroe St
 City Chicago State IL Zip Code 60603-4096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMO Harris Bank N.A. Occupation (for Individual) Head US Comm'l Bking Segment
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2016
Transaction ID : 20160906105130-2
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Ferris, Scott, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 W Monroe St
 City Chicago State IL Zip Code 60603-4096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMO Harris Bank N.A. Occupation (for Individual) Head US Comm'l Bking Segment
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2016
Transaction ID : 2016092085325-2
 Amount of Each Receipt this Period 25.00
 Memo Item

C. George, Lisa, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 E Camelback Rd
 City Phoenix State AZ Zip Code 85012-1668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMO Harris Bank N.A. Occupation (for Individual) US Regnl Lead Retail Bking
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 09 / 2016
Transaction ID : 20160906105130-27
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 17
<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

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NAME OF COMMITTEE (In Full)
BMO Harris Bank N.A. Government Affairs Fund

A. George, Lisa, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 E Camelback Rd

City Phoenix	State AZ	Zip Code 85012-1668
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) US Regnl Lead Retail Bking
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		23		2016

Transaction ID : 2016092085325-33

Amount of Each Receipt this Period
25.00

Memo Item

B. Gessner, Joseph, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 N Water St

City Milwaukee	State WI	Zip Code 53202-0002
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) US MD Commercial Banking CQ
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2016

Transaction ID : 20160906105130-35

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 770 N Water St

City Milwaukee	State WI	Zip Code 53202-0002
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) US MD Commercial Banking CQ
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		23		2016

Transaction ID : 2016092085325-41

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
BMO Harris Bank N.A. Government Affairs Fund

A. Langan, Michael, G, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1441 N Taylor Dr

City Sheboygan	State WI	Zip Code 53081-1989
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) US MD Commercial Banking CQ
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : 20160906105130-28

Amount of Each Receipt this Period
20.00

Memo Item

B. Langan, Michael, G, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1441 N Taylor Dr

City Sheboygan	State WI	Zip Code 53081-1989
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) US MD Commercial Banking CQ
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2016

Transaction ID : 2016092085325-34

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 14850 N Scottsdale Rd
Ste 300

City Scottsdale	State AZ	Zip Code 85254-2866
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) Managing Director, PB
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : 20160906105130-15

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
BMO Harris Bank N.A. Government Affairs Fund

A. Matteucci, Steven, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14850 N Scottsdale Rd
 Ste 300
 City Scottsdale State AZ Zip Code 85254-2866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMO Harris Bank N.A. Occupation (for Individual) Managing Director, PB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2016
Transaction ID : 2016092085325-20
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Mika, David, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 E 1100 N
 City Chesterton State IN Zip Code 46304-9697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMO Harris Bank N.A. Occupation (for Individual) US Retail Banking Market Mgr
 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
 09 / 09 / 2016
Transaction ID : 20160906105130-22
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Mika, David, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 E 1100 N
 City Chesterton State IN Zip Code 46304-9697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMO Harris Bank N.A. Occupation (for Individual) US Retail Banking Market Mgr
 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
 09 / 23 / 2016
Transaction ID : 2016092085325-28
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
BMO Harris Bank N.A. Government Affairs Fund

A. Murphy, Patrick, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 W Monroe St

City Chicago	State IL	Zip Code 60603-4096
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Bank of Montreal - Chicago	Occupation (for Individual) Managing Director
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : 20160906105130-6

Amount of Each Receipt this Period
20.00

Memo Item

B. Murphy, Patrick, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 W Monroe St

City Chicago	State IL	Zip Code 60603-4096
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Bank of Montreal - Chicago	Occupation (for Individual) Managing Director
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2016

Transaction ID : 2016092085325-7

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 1 W Main St

City Madison	State WI	Zip Code 53703-3327
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) NATIONAL PRES, BB- AGRICULTURE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : 20160906105130-31

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
BMO Harris Bank N.A. Government Affairs Fund

A. Nelson, Douglas, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 W Main St

City Madison	State WI	Zip Code 53703-3327
-----------------	-------------	------------------------

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

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) NATIONAL PRES, BB- AGRICULTURE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2016

Transaction ID : 2016092085325-37

Amount of Each Receipt this Period
50.00

Memo Item

B. Snyder, Judson, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 N Water St

City Milwaukee	State WI	Zip Code 53202-0002
-------------------	-------------	------------------------

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

Name of Employer (for Individual) BMO Harris Equipment Finance	Occupation (for Individual) Head US Comm'l Bking Segment
---	---

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
09	/	09	/	2016

Transaction ID : 20160906105130-29

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 770 N Water St

City Milwaukee	State WI	Zip Code 53202-0002
-------------------	-------------	------------------------

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

Name of Employer (for Individual) BMO Harris Equipment Finance	Occupation (for Individual) Head US Comm'l Bking Segment
---	---

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
09	/	23	/	2016

Transaction ID : 2016092085325-35

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
BMO Harris Bank N.A. Government Affairs Fund

A. Tallberg, Janet, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 N Water St

City Milwaukee	State WI	Zip Code 53202-0002
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) Director - Audit, Credit
---	---

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
09		09		2016

Transaction ID : 20160906105130-40

Amount of Each Receipt this Period
25.00

Memo Item

B. Tallberg, Janet, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 770 N Water St

City Milwaukee	State WI	Zip Code 53202-0002
-------------------	-------------	------------------------

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

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) Director - Audit, Credit
---	---

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
09		23		2016

Transaction ID : 2016092085325-46

Amount of Each Receipt this Period
25.00

Memo Item

C. Wright, Ann, Marie Mitchell, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 W Monroe St

City Chicago	State IL	Zip Code 60603-4096
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) COO, Commercial Banking
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

Transaction ID : 20160906105130-9

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 17
(check only one)

<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

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NAME OF COMMITTEE (In Full)
BMO Harris Bank N.A. Government Affairs Fund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wright, Ann, Marie Mitchell, ,

Mailing Address 111 W Monroe St

City Chicago	State IL	Zip Code 60603-4096
-----------------	-------------	------------------------

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

Name of Employer (for Individual) BMO Harris Bank N.A.	Occupation (for Individual) COO, Commercial Banking
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		23		2016

Transaction ID : 2016092085325-11

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	948.00

**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"/> 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)
BMO Harris Bank N.A. Government Affairs Fund

A. Dold For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 6312

City: Libertyville, State: IL, Zip Code: 60048

Purpose of Disbursement: 2016 General

Candidate Name: **Dold, Robert, James, , Jr.**

Office Sought: House, Senate, President
State: IL, District: 10

Disbursement For: 2016
 Primary, General, Other (specify) ▼

Date of Disbursement: 09 / 09 / 2016

FEC Identification Number: **C00465971**
Transaction ID : F1BE07A703I
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. Quigley For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 2652 N Southport Avenue Unit E

City: Chicago, State: IL, Zip Code: 60614

Purpose of Disbursement: 2016 General

Candidate Name: **Quigley, Michael, , ,**

Office Sought: House, Senate, President
State: IL, District: 05

Disbursement For: 2016
 Primary, General, Other (specify) ▼

Date of Disbursement: 09 / 09 / 2016

FEC Identification Number: **C00457556**
Transaction ID : 4931473FBAL
Amount of Each Disbursement this Period: 500.00

Memo Item

C. Randy Hultgren For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 717

City: St Charles, State: IL, Zip Code: 60174-0717

Purpose of Disbursement: 2016 General

Candidate Name: **Hultgren, Randall, Mark, ,**

Office Sought: House, Senate, President
State: IL, District: 14

Disbursement For: 2016
 Primary, General, Other (specify) ▼

Date of Disbursement: 09 / 09 / 2016

FEC Identification Number: **C00467522**
Transaction ID : 6EE53B3B25
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	5500.00