

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Family-PAC Federal

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="3132.88"/>	<input type="text" value="3132.88"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3132.88"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="18850.0"/>	<input type="text" value="18850.0"/>
(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="21982.88"/>	<input type="text" value="21982.88"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="19633.52"/>	<input type="text" value="19633.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2349.36"/>	<input type="text" value="2349.36"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="3716.0"/>	

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Family-PAC Federal

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2013 To: M M / D D / Y Y Y Y 06 / 30 / 2013

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).....	17975.0	17975.0
(ii) Unitemized	875.0	875.0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	18850.0	18850.0
(b) Political Party Committees	0.0	0.0
(c) Other Political Committees (such as PACs).....	0.0	0.0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	18850.0	18850.0
12. Transfers From Affiliated/Other Party Committees.....	0.0	0.0
13. All Loans Received	0.0	0.0
14. Loan Repayments Received.....	0.0	0.0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.0	0.0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.0	0.0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.0	0.0
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))..... ▶	18850.0	18850.0
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18850.0	18850.0

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	8783.52	8783.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8783.52	8783.52
22. Transfers to Affiliated/Other Party Committees.....	0.0	0.0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10850.0	10850.0
24. Independent Expenditures (use Schedule E)	0.0	0.0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.0	0.0
26. Loan Repayments Made.....	0.0	0.0
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.0	0.0
(b) Political Party Committees	0.0	0.0
(c) Other Political Committees (such as PACs).....	0.0	0.0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.0	0.0
29. Other Disbursements	0.0	0.0
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)) ..	19633.52	19633.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19633.52	19633.52

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)	18850.0	18850.0
34. Total Contribution Refunds (from Line 28(d))	0.0	0.0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18850.0	18850.0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8783.52	8783.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.0	0.0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8783.52	8783.52

**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 21
<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)
Family-PAC Federal

A. Bernard B Bertsche
Full Name (Last, First, Middle Initial)
Mailing Address 41 W. 872 White Oak Ln.
City St. Charles State IL Zip Code 60175
FEC ID number of contributing federal political committee. **C**
Name of Employer Camcraft Inc. Occupation CEO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.0

Date of Receipt 04 / 03 / 2013
Transaction ID : 1374688196656
Amount of Each Receipt this Period 1500.0
Check

B. Janann Cleveland
Full Name (Last, First, Middle Initial)
Mailing Address 9 Victoria Lane
City Lincolnshire State IL Zip Code 60069
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation housewife
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 325.0

Date of Receipt 04 / 16 / 2013
Transaction ID : 1374679287020
Amount of Each Receipt this Period 125.0
Check

C. Kevin Costello
Full Name (Last, First, Middle Initial)
Mailing Address 600 N. Dearborn
City Chicago State IL Zip Code 60610
FEC ID number of contributing federal political committee. **C**
Name of Employer Home Run Inn Occupation Executive
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.0

Date of Receipt 01 / 23 / 2013
Transaction ID : 1374678925462
Amount of Each Receipt this Period 250.0
Check

SUBTOTAL of Receipts This Page (optional)..... **1875.00**
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 7 OF 21
	(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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)
A. John Curry

Mailing Address 1612 N. Wolcott Ave

City Chicago State IL Zip Code 60622

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

Name of Employer: Polsinelli, Shugart Occupation: Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2013
Transaction ID : 1374688285670

Amount of Each Receipt this Period
250.0

Check

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

Mailing Address 7 Horseshoe Lane

City Lemont State IL Zip Code 60439

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

Name of Employer: Richards Building Supply Occupation: Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 1374678768214

Amount of Each Receipt this Period
250.0

Check

Full Name (Last, First, Middle Initial)
C. Nathan A Hancock

Mailing Address 5 N. 171 Percheron Lane

City Wayne State IL Zip Code 60184

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

Name of Employer: Hancock International Occupation: CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 1374682315012

Amount of Each Receipt this Period
500.0

Check

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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 8 OF 21
	<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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)
A. Nathan A Hancock

Mailing Address 5 N. 171 Percheron Lane

City Wayne	State IL	Zip Code 60184
---------------	-------------	-------------------

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

Name of Employer Hancock International	Occupation CEO
-------------------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2013
Transaction ID : 1374682342215

Amount of Each Receipt this Period
1000.0

Check

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

Mailing Address 2215 York Road Suite 500

City Oak Brook	State IL	Zip Code 60523
-------------------	-------------	-------------------

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

Name of Employer Huizenga Capital Management	Occupation Chairman
-------------------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 1374682240091

Amount of Each Receipt this Period
2500.0

Check

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

Mailing Address 13002 Timber Trail

City Palos Heights	State IL	Zip Code 60643
-----------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 1374678867087

Amount of Each Receipt this Period
250.0

Check

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
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 9 OF 21
<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)
Family-PAC Federal

A. Mr John McEnroe
Full Name (Last, First, Middle Initial)

Mailing Address 222 N. LaSalle St. Ste. 2600

City Chicago	State IL	Zip Code 60601
-----------------	-------------	-------------------

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

Name of Employer Vedder Price	Occupation Attorney
----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.0

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2013

Transaction ID : 1374678970867

Amount of Each Receipt this Period
5000.0

Check

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

Mailing Address 561 Willow Road

City Winnetka	State IL	Zip Code 60093
------------------	-------------	-------------------

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

Name of Employer None	Occupation Housewife
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.0

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	20	/	2013

Transaction ID : 1374773256687

Amount of Each Receipt this Period
2500.0

Check

C. Noel G Moore
Full Name (Last, First, Middle Initial)

Mailing Address 141 W. Jackson Boulevard Suite 153

City Chicago	State IL	Zip Code 60604
-----------------	-------------	-------------------

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

Name of Employer Logos Trading	Occupation Trading-trader
-----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.0

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2013

Transaction ID : 1374688339341

Amount of Each Receipt this Period
1000.0

Check

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
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 10 OF 21
(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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)
A. Marc Porter

Mailing Address 389 York Drive

City Grayslake State IL Zip Code 60030

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

Name of Employer Figluio & Silverman Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2013
Transaction ID : 1374682602196

Amount of Each Receipt this Period
 350.0

Check

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

Mailing Address 1396 N. Waukegan Rd.

City Lake Forest State IL Zip Code 60045

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

Name of Employer Uline Industries Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 1374682195810

Amount of Each Receipt this Period
 2500.0

Check

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2850.00
TOTAL This Period (last page this line number only).....▶	17975.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)

A. Kristin Kolehouse

Mailing Address 536 W Arlington Pl

City Chicago State IL Zip Code 60614

Purpose of Disbursement
Part-time Bookkeeping, Research Project

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 1374773781484

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 352 West Grand Avenue

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Office Supplies

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 1374692918064

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 352 West Grand Avenue

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Office Supplies

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 1374695697028

Amount of Each Disbursement this Period

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

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 352 West Grand Avenue

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2013

Transaction ID : 1374695900401

Amount of Each Disbursement this Period

178.41

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 352 West Grand Avenue

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2013

Transaction ID : 1374695947447

Amount of Each Disbursement this Period

204.63

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 352 West Grand Avenue

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2013

Transaction ID : 1374698782989

Amount of Each Disbursement this Period

44.5

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

427.54

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)

A. PAsoft Solutions and Services

Mailing Address 3595 Canton Road
Suite A9 #122

City Marietta State GA Zip Code 30066

Purpose of Disbursement
FEC Filing Service

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2013

Transaction ID : 1374690532251

Amount of Each Disbursement this Period

450.0

Full Name (Last, First, Middle Initial)

B. Paul Caprio and Associates

Mailing Address 414 N Orleans Plaza #320

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Expenses Reimbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2013

Transaction ID : 1374690997573

Amount of Each Disbursement this Period

389.58

Full Name (Last, First, Middle Initial)

C. Paul Caprio and Associates

Mailing Address 414 N Orleans Plaza #320

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Expenses Reimbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2013

Transaction ID : 1374691038385

Amount of Each Disbursement this Period

330.63

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

1170.21

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)

A. Paul Caprio and Associates

Mailing Address 414 N Orleans Plaza #320

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Expenses

001

Candidate Name

Category/
Type

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
0	1				2	8		2	0	1	3		

Transaction ID : 1374692283634

Amount of Each Disbursement this Period

2	0	2	1
---	---	---	---

Full Name (Last, First, Middle Initial)

B. Paul Caprio and Associates

Mailing Address 414 N Orleans Plaza #320

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Expenses Reimbursement

001

Candidate Name

Category/
Type

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
0	1				2	9		2	0	1	3		

Transaction ID : 1374692324478

Amount of Each Disbursement this Period

8	4	6	9	1
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Hyatt Hotel

Mailing Address One South Capitol Avenue

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
lodging

002

Candidate Name

Category/
Type

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
0	1				2	9		2	0	1	3		

Transaction ID : 1389760905504

Amount of Each Disbursement this Period

5	5	4	7	6
---	---	---	---	---

[MEMO ITEM]

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

8	6	7	1	2
---	---	---	---	---

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

8	6	7	1	2
---	---	---	---	---

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)

A. Paul Caprio and Associates

Mailing Address 414 N Orleans Plaza #320

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Expenses Reimbursement

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2013

Transaction ID : 1374692602193

Amount of Each Disbursement this Period

117.33

Full Name (Last, First, Middle Initial)

B. Paul Caprio and Associates

Mailing Address 414 N Orleans Plaza #320

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Delivery fee reimbursement

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2013

Transaction ID : 1374695732965

Amount of Each Disbursement this Period

54.0

Full Name (Last, First, Middle Initial)

C. Paul Caprio and Associates

Mailing Address 414 N Orleans Plaza #320

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Expenses Reimbursement

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2013

Transaction ID : 1374695797511

Amount of Each Disbursement this Period

2118.64

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

2289.97

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)

A. Harry Caray's Restaurant

Mailing Address 33 W Kinzie St

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Rand Paul Catering

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 1389732287945

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Harry Caray's Restaurant

Mailing Address 33 W Kinzie St

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Rand Paul Catering

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 1389732340825

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Harry Caray's Restaurant

Mailing Address 33 W Kinzie St

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Rand Paul Catering

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 1389732994370

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)

A. Sandy Rios

Mailing Address 2727 Quincy Street

City Arlington State VA Zip Code 22206

Purpose of Disbursement
Representing Family-PAC Fed in meeting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 1374690814294

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)

A. Dan Lipinski for Congress

Mailing Address PO Box 520

City State Zip Code
Western Springs IL 60558

Purpose of Disbursement
PAC Contributions

011

Candidate Name

DANIEL WILLIAM LIPINSKI

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	3

Transaction ID : 1374696464862

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. RANDPAC

Mailing Address PO BOX 72598

City State Zip Code
NEWPORT KY 41072

Purpose of Disbursement
PAC Contributions

011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	3

Transaction ID : 1374696224678

Amount of Each Disbursement this Period

8	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. TED CRUZ FOR SENATE

Mailing Address 815 A Bravos
PMB 550

City State Zip Code
Austin TX 78701

Purpose of Disbursement
Political Contribution

011

Candidate Name

Ted Cruz

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	1	3

Transaction ID : 1374698861019

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

2	8	5	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

**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)
Family-PAC Federal

Full Name (Last, First, Middle Initial)

A. TIM SCOTT FOR SENATE

Mailing Address 1405 ASHLEY RIVER ROAD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement
Political Contribution

011

Candidate Name

Tim Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SC District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 29 / 2013

Transaction ID : 1374697304367

Amount of Each Disbursement this Period

3000.0

Full Name (Last, First, Middle Initial)

B. TIM SCOTT FOR SENATE

Mailing Address 1405 ASHLEY RIVER ROAD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement
Political Contribution

011

Candidate Name

Tim Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SC District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 29 / 2013

Transaction ID : 1374697490052

Amount of Each Disbursement this Period

5000.0

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

8000.00

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

10850.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 21
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Family-PAC Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paul Caprio and Associates	Nature of Debt (Purpose): Travel Expense
Mailing Address 414 N Orleans Plaza #320	
City State Zip Code Chicago IL 60654	

Outstanding Balance Beginning This Period 800.0	Transaction ID : 1308031426886	
Amount Incurred This Period 0.00	Payment This Period 0.0	Outstanding Balance at Close of This Period 800.0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paul Caprio and Associates	Nature of Debt (Purpose): Reception Expense
Mailing Address 414 N Orleans Plaza #320	
City State Zip Code Chicago IL 60654	

Outstanding Balance Beginning This Period 916.0	Transaction ID : 1308031631355	
Amount Incurred This Period 0.00	Payment This Period 0.0	Outstanding Balance at Close of This Period 916.0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paul Caprio and Associates	Nature of Debt (Purpose): Loan
Mailing Address 414 N Orleans Plaza #320	
City State Zip Code Chicago IL 60654	

Outstanding Balance Beginning This Period 1000.0	Transaction ID : 1342021838542	
Amount Incurred This Period 0.00	Payment This Period 0.0	Outstanding Balance at Close of This Period 1000.0

1) SUBTOTALS This Period This Page (optional)..... ▶	2716.00
2) TOTALS This Period (last page this line number only)..... ▶	
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) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 21
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Family-PAC Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paul Caprio and Associates	Nature of Debt (Purpose): Debt 10/1/2012
Mailing Address 414 N Orleans Plaza #320	
City State Zip Code Chicago IL 60654	

Outstanding Balance Beginning This Period 1000.0	Transaction ID : 1351193803338	
Amount Incurred This Period 0.00	Payment This Period 0.0	Outstanding Balance at Close of This Period 1000.0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	1000.00
2) TOTALS This Period (last page this line number only)..... ▶	3716.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	3716.00