

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 CITIZENS FOR A BETTER ILLINOIS

ADDRESS (number and street) 1032 15TH STREET, NW SUITE 220 WASHINGTON DC 20005 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00669820 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) Mar 20 (M3) [X] Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 03 / 01 / 2018 through 03 / 31 / 2018

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

Signature of Treasurer KRAVITZ, STEVEN J., , , [Electronically Filed] Date 04 / 08 / 2018

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)

Page 2

Write or Type Committee Name

CITIZENS FOR A BETTER ILLINOIS

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="2018"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="197244.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="494300.00"/>	<input type="text" value="1270300.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="691544.00"/>	<input type="text" value="1270300.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="691506.12"/>	<input type="text" value="1270262.12"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="37.88"/>	<input type="text" value="37.88"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

CITIZENS FOR A BETTER ILLINOIS

Report Covering the Period: From: 03 / 01 / 2018 To: 03 / 31 / 2018

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).....	185800.00	623800.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	185800.00	623800.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	308500.00	646500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	494300.00	1270300.00
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)).....▶	494300.00	1270300.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	494300.00	1270300.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	63298.45	63298.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	63298.45	63298.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	548141.67	1126897.67
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).....	80066.00	80066.00
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)) ..	691506.12	1270262.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	691506.12	1270262.12

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)	494300.00	1270300.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	494300.00	1270300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	63298.45	63298.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	63298.45	63298.45

**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 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

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)
CITIZENS FOR A BETTER ILLINOIS

A. NARAL PRO-CHOICE AMERICA
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1156 15TH STREET NW SUITE 700

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
538000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2018

Transaction ID : SA11AI.4151

Amount of Each Receipt this Period
100000.00

Memo Item

B. NARAL PRO-CHOICE AMERICA
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1156 15TH STREET NW SUITE 700

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
563000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2018

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
25000.00

Memo Item

C. NARAL PRO-CHOICE AMERICA
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1156 15TH STREET NW SUITE 700

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
574000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2018

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period
11000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	136000.00
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 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)
CITIZENS FOR A BETTER ILLINOIS

A. NARAL PRO-CHOICE AMERICA

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

Mailing Address 1156 15TH STREET NW SUITE 700

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
582500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2018

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period
8500.00

Memo Item

B. NARAL PRO-CHOICE AMERICA

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

Mailing Address 1156 15TH STREET NW SUITE 700

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2018

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period
6300.00

Memo Item

C. Soros, Alex, , ,

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

Mailing Address 250 West 55th Street
Floor 27

City New York	State NY	Zip Code 10019
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
None Philanthropist

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
35000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2018

Transaction ID : SA11AI.4159

Amount of Each Receipt this Period
35000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	49800.00
TOTAL This Period (last page this line number only).....	185800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
CITIZENS FOR A BETTER ILLINOIS

A. HUMAN RIGHTS CAMPAIGN EQUALITY VOTES

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

Mailing Address 1640 RHODE ISLAND AVE NW

City WASHINGTON	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00508440

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
63000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2018

Transaction ID : SA11C.4153

Amount of Each Receipt this Period
25000.00

Memo Item

B. J STREET

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

Mailing Address PO BOX 66073

City WASHINGTON	State DC	Zip Code 20035
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FEC ID number of contributing federal political committee. **C** C90014028

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2018

Transaction ID : SA11C.4155

Amount of Each Receipt this Period
25000.00

Memo Item

C. MOVEON.ORG POLITICAL ACTION

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

Mailing Address PO BOX 96142

City WASHINGTON	State DC	Zip Code 20090
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FEC ID number of contributing federal political committee. **C** C00341396

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2018

Transaction ID : SA11C.4152

Amount of Each Receipt this Period
50000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100000.00
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 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
CITIZENS FOR A BETTER ILLINOIS

A. MOVEON.ORG POLITICAL ACTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 96142

City WASHINGTON	State DC	Zip Code 20090
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FEC ID number of contributing federal political committee. **C** C00341396

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2018

Transaction ID : SA11C.4154

Amount of Each Receipt this Period
50000.00

Memo Item

B. MOVEON.ORG POLITICAL ACTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 96142

City WASHINGTON	State DC	Zip Code 20090
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FEC ID number of contributing federal political committee. **C** C00341396

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
158500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	22	/	2018

Transaction ID : SA11C.4193

Amount of Each Receipt this Period
8500.00

Memo Item

C. PLANNED PARENTHOOD VOTES

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 123 WILLIAM ST, 10TH FLOOR

City NEW YORK	State NY	Zip Code 10038
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FEC ID number of contributing federal political committee. **C** C00489799

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
150000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2018

Transaction ID : SA11C.4161

Amount of Each Receipt this Period
150000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	208500.00
TOTAL This Period (last page this line number only).....	308500.00

**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"/> 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)
CITIZENS FOR A BETTER ILLINOIS

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 815 Connecticut Ave, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4189
Amount of Each Disbursement this Period
320.24

Memo Item

Full Name (Last, First, Middle Initial)

B. GBA Strategies

Mailing Address 1901 L Street, NW Suite 702

City Washington State DC Zip Code 20036

Purpose of Disbursement
Poilling

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4187
Amount of Each Disbursement this Period
27000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Gumbinner & Davies

Mailing Address 2001 S St NW Suite 301

City Washington State DC Zip Code 20009

Purpose of Disbursement
Mailing-Non Candidate Specific

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4164
Amount of Each Disbursement this Period
34578.21

Memo Item

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

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

61898.45

**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"/> 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)
CITIZENS FOR A BETTER ILLINOIS

A. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, P.C.

Full Name (Last, First, Middle Initial)

Mailing Address 1090 Vermont Ave., NW
Suite 700

City Washington State DC Zip Code 20005

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 14 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4150

Amount of Each Disbursement this Period: 675.00

Memo Item

B. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, P.C.

Full Name (Last, First, Middle Initial)

Mailing Address 1090 Vermont Ave., NW
Suite 700

City Washington State DC Zip Code 20005

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4196

Amount of Each Disbursement this Period: 680.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1355.00
TOTAL This Period (last page this line number only).....▶	63253.45

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CITIZENS FOR A BETTER ILLINOIS

Full Name (Last, First, Middle Initial) A. Illinois Immigrant Action		Date of Disbursement MM / DD / YYYY 03 / 14 / 2018	
Mailing Address 228 S. Wabash Suite 800		FEC Identification Number C [] Transaction ID : SB29.4145 Amount of Each Disbursement this Period [] 20066.00	
City Chicago State IL Zip Code 60604	Purpose of Disbursement Donation	Candidate Name []	Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Illinois Immigrant Action		Date of Disbursement MM / DD / YYYY 03 / 14 / 2018	
Mailing Address 228 S. Wabash Suite 800		FEC Identification Number C [] Transaction ID : SB29.4147 Amount of Each Disbursement this Period [] 60000.00	
City Chicago State IL Zip Code 60604	Purpose of Disbursement Donation	Candidate Name []	Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item

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

SUBTOTAL of Disbursements This Page (optional).....▶	80066.00
TOTAL This Period (last page this line number only).....▶	80066.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 17
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CITIZENS FOR A BETTER ILLINOIS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Three Point Media			Nature of Debt (Purpose): Ad Production
Mailing Address 290 Broadway Suite 120			
City Methuen	State MA	Zip Code 01844	

Outstanding Balance Beginning This Period <input type="text" value="11841.67"/>		Transaction ID : SD10.4167	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="11841.67"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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 <input type="text"/>			
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	

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 <input type="text"/>			
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) CITIZENS FOR A BETTER ILLINOIS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00669820 </div>
--	--

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Canal Partners Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 06 / 2018
Mailing Address 900 Circle 75 Parkway			Amount 112800.00
City Atlanta	State GA	Zip Code 30339	
Purpose of Expenditure TV Ads		Category/Type 	Transaction ID : SE.4127 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 01 / 2018
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose LIPINSKI, DANIEL, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>03</u> State: <u>IL</u>
Calendar Year-To-Date Per Election for Office Sought 691556.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Canal Partners Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 13 / 2018
Mailing Address 900 Circle 75 Parkway			Amount 169500.00
City Atlanta	State GA	Zip Code 30339	
Purpose of Expenditure TV Ads		Category/Type 	Transaction ID : SE.4131 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 08 / 2018
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose LIPINSKI, DANIEL, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>03</u> State: <u>IL</u>
Calendar Year-To-Date Per Election for Office Sought 861056.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	 282300.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KRAVITZ, STEVEN J., , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
04 / 08 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CITIZENS FOR A BETTER ILLINOIS
FEC IDENTIFICATION NUMBER
C C00669820

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Canal Partners Media
Mailing Address 900 Circle 75 Parkway
City Atlanta State GA Zip Code 30339
Purpose of Expenditure TV Ads
Name of Federal Candidate: LIPINSKI, DANIEL, , ,
Calendar Year-To-Date Per Election for Office Sought 1036056.00
Disbursement For: Primary

Full Name of Payee Canal Partners Media
Mailing Address 900 Circle 75 Parkway
City Atlanta State GA Zip Code 30339
Purpose of Expenditure TV Ads
Name of Federal Candidate: LIPINSKI, DANIEL, , ,
Calendar Year-To-Date Per Election for Office Sought 1111056.00
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 250000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KRAVITZ, STEVEN J., , [Electronically Filed] Date 04 / 08 / 2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CITIZENS FOR A BETTER ILLINOIS
FEC IDENTIFICATION NUMBER
C C00669820

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Chong + Koster
Mailing Address: 1640 Rhode Island Ave, NW Suite 600
City: Washington State: DC Zip Code: 20036
Purpose of Expenditure: Digital Ads
Date of Public Distribution/Dissemination: 03/15/2018
Amount: 4000.00
Transaction ID: SE.4163
Date of Disbursement or Obligation: 03/15/2018
Name of Federal Candidate: LIPINSKI, DANIEL, , ,
Office Sought: House District: 03 State: IL
Disbursement For: Primary

Full Name of Payee: Three Point Media
Mailing Address: 290 Broadway Suite 120
City: Methuen State: MA Zip Code: 01844
Purpose of Expenditure: Ad Production
Date of Public Distribution/Dissemination: 02/17/2018
Amount: 11061.67
Transaction ID: SE.4179
Date of Disbursement or Obligation: 03/15/2018
Name of Federal Candidate: LIPINSKI, DANIEL, , ,
Office Sought: House District: 03 State: IL
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 15061.67
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KRAVITZ, STEVEN J., ,
Signature

[Electronically Filed]

Date 04/08/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CITIZENS FOR A BETTER ILLINOIS
FEC IDENTIFICATION NUMBER
C C00669820

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Three Point Media
Mailing Address: 290 Broadway Suite 120
City: Methuen State: MA Zip Code: 01844
Purpose of Expenditure: Ad Production
Date of Public Distribution/Dissemination: 02/17/2018
Amount: 780.00
Transaction ID: SE.4182
Date of Disbursement or Obligation: 03/15/2018
Name of Federal Candidate: LIPINSKI, DANIEL, ,
Office Sought: House District: 03 State: IL
Calendar Year-To-Date Per Election for Office Sought: 1126897.67
Disbursement For: Primary

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Name of Federal Candidate
Office Sought
District
State
Calendar Year-To-Date Per Election for Office Sought
Disbursement For

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures: 780.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures: 548141.67

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KRAVITZ, STEVEN J., ,

[Electronically Filed]

Date 04/08/2018

Signature