

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

KAIFESH FOR CONGRESS

ADDRESS (number and street)
▼

869 E SCHAUMBURG RD.

#377

Check if different
than previously
reported. (ACC)

SCHAUMBURG

IL

60194

2. FEC IDENTIFICATION NUMBER ▼

C

C00551036

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

IL

08

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)



Termination Report (TER)

(b) 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
11 / 04 / 2014in the
State of

IL

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2014

through

M M / D D / Y Y Y Y
10 / 15 / 2014

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

Type or Print Name of Treasurer Anthony Luczkiw

Signature of Treasurer

Anthony Luczkiw

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 23 / 2014

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

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 41

Write or Type Committee Name

KAIFESH FOR CONGRESS

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	27794.00	285588.15
(b) Total Contribution Refunds (from Line 20(d))	3450.00	3950.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	24344.00	281638.15
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	16190.49	282770.61
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	16190.49	282770.61
8. Cash on Hand at Close of Reporting Period (from Line 27)	25767.54	
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)	22800.00	

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 3 (Revised 12/2003)

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Write or Type Committee Name

KAIFESH FOR CONGRESS

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

23260.00

236149.64

(ii) Unitemized.....

3034.00

35608.97

(iii) TOTAL of contributions from individuals ▶

26294.00

271758.61

(b) Political Party Committees.....

0.00

500.00

(c) Other Political Committees (such as PACs).....

1500.00

11125.00

(d) The Candidate.....

0.00

2204.54

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

27794.00

285588.15

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

3000.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

21000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

21000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

3450.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

27794.00

313038.15

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 41

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16190.49	282770.61
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	3450.00	3950.00
(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 20(a), (b), and (c)).....	3450.00	3950.00
21. OTHER DISBURSEMENTS	0.00	550.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	19640.49	287270.61

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	17614.03
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	27794.00
25. SUBTOTAL (add Line 23 and Line 24).....	45408.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	19640.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25767.54

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

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

FOR LINE NUMBER:

PAGE 5 OF 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Donald Anderson

Mailing Address 422 E. Hill St.

City

Genoa

State

IL

Zip Code

60135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11AI.6480

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

William Bergamini

Mailing Address 13231 Hidden Valley Dr

City

Homer Glen

State

IL

Zip Code

60491

FEC ID number of contributing
federal political committee.

C

Name of Employer

Illco

Occupation

President

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.6453

Amount of Each Receipt this Period

50.00

Paypal

Full Name (Last, First, Middle Initial)

Ali Cain

Mailing Address 2807 Odum Drive

City

Scahumburg

State

IL

Zip Code

60194

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11AI.6690

Amount of Each Receipt this Period

20.00

Contribution

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

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

270.00

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

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

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Randy Coester

Mailing Address 34007 Pearl St

City

Carpentersville

State

IL

Zip Code

60146

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired Carpenter

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

4083.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.6459

Amount of Each Receipt this Period

40.00

Contribution

Full Name (Last, First, Middle Initial)

B. Casey Graham

Mailing Address 11 Whitehouse Dr

City

Poquoson

State

VA

Zip Code

23662

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Seafood Sales

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.6665

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

C. Beth Hamparian

Mailing Address 39 W Magnolia Dr

City

Streamwood

State

IL

Zip Code

60107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information requested

Occupation

Information requested

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11AI.6633

Amount of Each Receipt this Period

250.00

Contribution

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

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

590.00

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

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

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

William Hubbell

A.

Mailing Address 300 S Biscayne Blvd #4006

City

Miami

State

FL

Zip Code

33131

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Investor

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.6516

Amount of Each Receipt this Period

4000.00

Contribution

Full Name (Last, First, Middle Initial)

Peter Huizenga

B.

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 ManagementOccupation
CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.6507

Amount of Each Receipt this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

Larry Kaifesh, Sr

C.

Mailing Address 406 N Warwick

City

Westmont

State

IL

Zip Code

60559

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Transaction ID : SA11AI.6468

Amount of Each Receipt this Period

100.00

Contribution

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

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

6100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Andrea Koshaba

Mailing Address 1124 Lancaster Ave

City

Elk Grove Village

State

IL

Zip Code

60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thulin and AssociatesOccupation
Owner/Tax Accountant

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11AI.6473

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

B. Edward Louis

Mailing Address 645 N Wren Ave

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
UALOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11AI.6449

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

C. Michael Madia

Mailing Address 101 Brixham Pl

City

Schaumburg

State

IL

Zip Code

60194

FEC ID number of contributing
federal political committee.

C

Name of Employer
AT&TOccupation
Manager

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11AI.6636

Amount of Each Receipt this Period

40.00

Contribution

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

440.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 41

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Michael Maurizi

Mailing Address 2015 Woodhollow Dr

City
Columbia

State
MO

Zip Code
65203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 10 / 2014

Transaction ID : SA11AI.6572

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

Brian Medley

Mailing Address 507 Cameron Way

City
Buffalo Grove

State
IL

Zip Code
60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Practices Inpatient Care

Occupation
Medical Doctor

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.6523

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

Stephen Minihane

Mailing Address 1141 Rockbridge Ave

City
Norfolk

State
VA

Zip Code
23508

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Navy

Occupation
Naval Officer

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : SA11AI.6667

Amount of Each Receipt this Period

300.00

Contribution

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

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

1050.00

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

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

FOR LINE NUMBER:

PAGE 10 OF 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Bill Niketas

Mailing Address 3712 Mountain Park Drive

City

Birmingham

State

AL

Zip Code

35213

FEC ID number of contributing federal political committee.

C

Name of Employer
Aggregates USAOccupation
CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.6663

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Martin Ozinga III

Mailing Address 19001 Old LaGrange Road
Ste 300

City

Mokena

State

IL

Zip Code

60448

FEC ID number of contributing federal political committee.

C

Name of Employer
Ozinga Bros IncOccupation
Owner

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.6467

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jonathan Pardee

Mailing Address 540 Bellevue Avenue

City

Newport

State

RI

Zip Code

02840

FEC ID number of contributing federal political committee.

C

Name of Employer
SelfOccupation
Marketing

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.6582

Amount of Each Receipt this Period

200.00

Contribution

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

1450.00

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

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

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

FOR LINE NUMBER:

PAGE 11 OF 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Jonathan Pardee

A.

Mailing Address 540 Bellevue Avenue

City

Newport

State

RI

Zip Code

02840

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Marketing

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11AI.6673

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

Josephine Romeo

B.

Mailing Address 4940 S Woodys Lane

City

Chana

State

IL

Zip Code

61015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iron SkilletOccupation
Retired/Hostess

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

4222.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11AI.6450

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

Albert Schrautemyer

C.

Mailing Address 19 W 106 Marino Ct

City

Itasca

State

IL

Zip Code

60143

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/aOccupation
Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2014

Transaction ID : SA11AI.6564

Amount of Each Receipt this Period

1500.00

Contribution

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

1900.00

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

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

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

FOR LINE NUMBER:

PAGE 12 OF 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Beverly Schwan

Mailing Address 27 Watergate

City

South Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.6611

Amount of Each Receipt this Period

2000.00

Reattribute: Overcontribution to Spouse

Full Name (Last, First, Middle Initial)

John Schwan

Mailing Address 27 Watergate

City

South Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

CTI Industries

Occupation

CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.6606

Amount of Each Receipt this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

John Schwan

Mailing Address 27 Watergate

City

South Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

CTI Industries

Occupation

CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA11AI.6610

Amount of Each Receipt this Period

-2000.00

Reattribute: Contribution

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

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

2000.00

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

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

FOR LINE NUMBER:

PAGE 13 OF 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Ruth Smith

A.

Mailing Address 131 Mallory Ave

City

Elgin

State

IL

Zip Code

60123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

n/a

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11Al.6634

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

Robert Tiballi

B.

Mailing Address PO Box 5934

City

Elgin

State

IL

Zip Code

60121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Germbusters P.C.

Occupation

Physician & Administrator

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : SA11Al.6465

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

Randall Truckenbrodt

C.

Mailing Address 125 Indianwood Lane

City

Indian Head Park

State

IL

Zip Code

60525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Randall Industries

Occupation

Self Employed

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11Al.6585

Amount of Each Receipt this Period

200.00

Contribution

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

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

1300.00

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

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

FOR LINE NUMBER:

PAGE 14 OF 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Richard Uihlein

A.

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

Occupation

CEO/Owner

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.6505

Amount of Each Receipt this Period

2600.00

Contribution

Full Name (Last, First, Middle Initial)

M Elizabeth Weiss

B.

Mailing Address 1304 Hawthorne Lane

City

Hinsdale

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

6200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.6521

Amount of Each Receipt this Period

5200.00

Contribution = will reattribute when info is obtained

Full Name (Last, First, Middle Initial)

M Elizabeth Weiss

C.

Mailing Address 1304 Hawthorne Lane

City

Hinsdale

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.6694

Amount of Each Receipt this Period

-2600.00

Reattribute: Contribution = will reattribute when info is obtained

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

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

5200.00

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

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

FOR LINE NUMBER:

PAGE 15 OF 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Richard Weiss

A.

Mailing Address 1304 Hawthorne Lane

City

Hinsdale

State

IL

Zip Code

60521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wells Capitol Investment

Occupation

Manager

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

Transaction ID : SA11AI.6695

Amount of Each Receipt this Period

2600.00

Reattribute: Contribution

Full Name (Last, First, Middle Initial)

Frederick West

B.

Mailing Address 5388 Hugh Howell Rd.

City

Stone Mountain

State

GA

Zip Code

30087

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Construction Inc.

Occupation

Owner

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		01		2014

Transaction ID : SA11AI.6461

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

Rose Wilkes

C.

Mailing Address 316 N Ridgeland Ave

City

Elmhurst

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Homemaker

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		08		2014

Transaction ID : SA11AI.6608

Amount of Each Receipt this Period

100.00

Contribution

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

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

2900.00

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

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

FOR LINE NUMBER:

PAGE 16 OF 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Judith Wright

A.

Mailing Address 3013 Seekonk Ave

City

Elgin

State

IL

Zip Code

60124

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/aOccupation
Retired

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11Al.6637

Amount of Each Receipt this Period

60.00

Contribution

Full Name (Last, First, Middle Initial)

B.

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)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

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)

Election Cycle-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).....

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

60.00

23260.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 41

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS POLITICAL ACTION COMMITTEE

A.

Mailing Address 9700 WEST BRYN MAWR AVE.

City

ROSEMONT

State

IL

Zip Code

60018

FEC ID number of contributing
federal political committee.**C** C00005660

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2014

Transaction ID : SA11C.6567

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

UNDERGROUND CONTRACTORS ASSOCIATION PAC**B.**Mailing Address 500 PARK BLVD
SUITE 154C

City

ITASCA

State

IL

Zip Code

60143

FEC ID number of contributing
federal political committee.**C** C00414599

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

Transaction ID : SA11C.6635

Amount of Each Receipt this Period

500.00

Contribution

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
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

1500.00

1500.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ACTRIGHT

Mailing Address 2029 K STREET NW SUITE 300

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

Amount of Each Disbursement this Period

7.50

Purpose of Disbursement
Fundraising Revenue Share

003

Transaction ID : SB17.6479

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

B. AwesomeCampaigns.com Inc

Mailing Address 1220 St Charles St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City Elgin	State IL	Zip Code 60120
---------------	-------------	-------------------

Amount of Each Disbursement this Period

510.00

Purpose of Disbursement
Signage

004

Transaction ID : SB17.6423

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

C. AwesomeCampaigns.com Inc

Mailing Address 1220 St Charles St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2014

City Elgin	State IL	Zip Code 60120
---------------	-------------	-------------------

Amount of Each Disbursement this Period

687.50

Purpose of Disbursement
Signs & Frames

004

Transaction ID : SB17.6525

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

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

1205.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Bloomington Township

Mailing Address PO Box 251

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

City	State	Zip Code
Bloomington	IL	60108

Amount of Each Disbursement this Period

400.00

Purpose of Disbursement
Golf Outing

001

Transaction ID : SB17.6489

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

B. CBC Tax & AccountingMailing Address 1843 Hicks Road
Suite A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
Rolling Meadows	IL	60008

Amount of Each Disbursement this Period

1937.50

Purpose of Disbursement
Accounting, bank balancing, FEC filing, paying of bills

001

Transaction ID : SB17.6486

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

c. Anna Coester

Mailing Address 34007 Pearl St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
Kirkland	IL	60146

Amount of Each Disbursement this Period

882.10

Purpose of Disbursement
Payroll

001

Transaction ID : SB17.6487

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

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

3219.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Comcast

Mailing Address 31 S. Prospect Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
Roselle	IL	60172

Amount of Each Disbursement this Period

115.79

Purpose of Disbursement
Utility

001

Transaction ID : SB17.6490

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: IL District: 08

Full Name (Last, First, Middle Initial)

B. ComEd

Mailing Address P.O. Box 805379

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
Chicago	IL	60680

Amount of Each Disbursement this Period

199.60

Purpose of Disbursement
Electric Utility

001

Transaction ID : SB17.6485

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
----------------	--	--

State: IL District: 08

Full Name (Last, First, Middle Initial)

C. Curtis Scott Advertising IncMailing Address 1550 Spring Road
Ste 220

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2014

City	State	Zip Code
Oak Brook	IL	60523

Amount of Each Disbursement this Period

1871.00

Purpose of Disbursement
Printing of Walkcards

004

Transaction ID : SB17.6526

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
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State: IL District: 08

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

2186.39

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Dynamic Marketing Ideas

Mailing Address 5210 Malibu Ct

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
McHenry	IL	60050

Amount of Each Disbursement this Period

850.00

Purpose of Disbursement
Website maintenance & E-mailing

001

Transaction ID : SB17.6483

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

B. Larry KaifeshMailing Address 869 E Schaumburg Rd
#377

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
Schaumburg	IL	60194

Amount of Each Disbursement this Period

819.73

Purpose of Disbursement
Reimbursement for breakfast & Menards

003

Transaction ID : SB17.6493

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

c. Poplar Creek Country Club

Mailing Address 1685 W Higgins Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Hoffman Estates	IL	60169

Amount of Each Disbursement this Period

461.05

Purpose of Disbursement
Breakfast Event

003

Transaction ID : SB17.6493.0

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

1669.73

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Menards

Mailing Address 2001 S Perryville Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
Rockford	IL	61112

Amount of Each Disbursement this Period

358.68

Purpose of Disbursement
Office & Sign Supplies

001

Transaction ID : SB17.6493.1

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type**[MEMO ITEM]**

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

B. Larry KaifeshMailing Address 869 E Schaumburg Rd
#377

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2014

City	State	Zip Code
Schaumburg	IL	60194

Amount of Each Disbursement this Period

1738.80

Purpose of Disbursement
Newspaper Ad Reimbursement

004

Transaction ID : SB17.6528

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

c. Larry KaifeshMailing Address 869 E Schaumburg Rd
#377

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2014

City	State	Zip Code
Schaumburg	IL	60194

Amount of Each Disbursement this Period

1239.15

Purpose of Disbursement
Reimbursement Newspaper Ad

004

Transaction ID : SB17.6594

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

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

2977.95

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Chicago Tribune Company

Mailing Address 435 North Michigan Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2014

City	State	Zip Code
Chicago	IL	60611

Purpose of Disbursement
Newspaper Ad

004

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Amount of Each Disbursement this Period

1239.15

Transaction ID : SB17.6594.0

[MEMO ITEM]**B. Moneris**

Mailing Address PO Box 59390

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

City	State	Zip Code
Schaumburg	IL	60159

Purpose of Disbursement
Credit Card Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Amount of Each Disbursement this Period

118.32

Transaction ID : SB17.6496

c. Nequity Partners

Mailing Address 678 Buena Vista Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
Glen Ellyn	IL	60137

Purpose of Disbursement
Media Management Services

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Amount of Each Disbursement this Period

550.00

Transaction ID : SB17.6481

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

668.32

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Nicor

Mailing Address PO Box 5407

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2014

City	State	Zip Code
Carol Stream	IL	60197

Amount of Each Disbursement this Period

28.49

Purpose of Disbursement
Utility

001

Transaction ID : SB17.6527

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 2211 North First Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
San Jose	CA	95131

Amount of Each Disbursement this Period

1.75

Purpose of Disbursement
Paypal Expense

001

Transaction ID : SB17.6454

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

c. Paypal

Mailing Address 2211 North First Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

City	State	Zip Code
San Jose	CA	95131

Amount of Each Disbursement this Period

0.88

Purpose of Disbursement
Paypal Expense

001

Transaction ID : SB17.6456

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

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

31.12

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

1.05

Transaction ID : SB17.6458

B. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

1.46

Transaction ID : SB17.6460

c. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

6.10

Transaction ID : SB17.6462

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

8.61

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

1.46

Transaction ID : SB17.6464

B. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

6.10

Transaction ID : SB17.6451

c. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Shipping

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2014

Amount of Each Disbursement this Period

1.93

Transaction ID : SB17.6452

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

9.49

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

116.30

Transaction ID : SB17.6517

B. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

0.88

Transaction ID : SB17.6520

c. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

151.10

Transaction ID : SB17.6522

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

268.28

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

14.80

Transaction ID : SB17.6524

B. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.6513

c. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Charge

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

0.62

Transaction ID : SB17.6515

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

16.45

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2014

Amount of Each Disbursement this Period

6.10

Transaction ID : SB17.6586

B. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

3.40

Transaction ID : SB17.6589

c. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Shipping

001

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

5.05

Transaction ID : SB17.6591

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

14.55

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

0.59

Transaction ID : SB17.6593

B. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

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
10		10		2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.6581

c. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2014

Amount of Each Disbursement this Period

6.10

Transaction ID : SB17.6583

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

9.89

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2014

City	State	Zip Code
San Jose	CA	95131

Amount of Each Disbursement this Period

0.88

Transaction ID : SB17.6576Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 2211 North First Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2014

City	State	Zip Code
San Jose	CA	95131

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.6578Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

c. Paypal

Mailing Address 2211 North First Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2014

City	State	Zip Code
San Jose	CA	95131

Amount of Each Disbursement this Period

1.75

Transaction ID : SB17.6645Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

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

5.83

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.6662

B. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

7.55

Transaction ID : SB17.6664

c. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

9.00

Transaction ID : SB17.6666

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

17.58

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

9.00

Transaction ID : SB17.6668

B. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.6670

c. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Category/
Type

Candidate Name

KAIFESH FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

1.17

Transaction ID : SB17.6672

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

13.37

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

6.10

Transaction ID : SB17.6674

B. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

0.88

Transaction ID : SB17.6676

c. Paypal

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement
Paypal Expense

001

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.6678

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

10.18

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Phil Simshauser

Mailing Address 636 E. Irving Park Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
Roselle	IL	60172

Amount of Each Disbursement this Period

\$	2250.00
----	---------

Purpose of Disbursement
Campaign Manager

001

Transaction ID : SB17.6484

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

B. William Bernardoni

Mailing Address 195 Malibu Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2014

City	State	Zip Code
Romeoville	IL	60446

Amount of Each Disbursement this Period

\$	1500.00
----	---------

Purpose of Disbursement
Campaign Communications Director

001

Transaction ID : SB17.6482

Candidate Name

KAIFESH FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 08

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

\$	
----	--

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

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

3750.00

16082.34

SCHEDULE C (FEC Form 3)
LOANS

PAGE 37 OF 41

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4392

KAIFESH FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Larry Kaifesh

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

869 E Schaumburg Rd
#377

City

State

ZIP Code

Schaumburg

IL

60194

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
10 / 01 / 2013

Date Due

M M / D D / Y Y Y Y
10/02/2018

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 38 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4621

KAIFESH FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Larry Kaifesh

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

869 E Schaumburg Rd
#377

City

State

ZIP Code

Schaumburg

IL

60194

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
02 / 20 / 2014

Date Due

M M / D D / Y Y Y Y
02/21/2015

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

15000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 39 OF 41

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4622

KAIFESH FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Larry Kaifesh

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

869 E Schaumburg Rd
#377

City

State

ZIP Code

Schaumburg

IL

60194

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
02 / 20 / 2014

Date Due

M M / D D / Y Y Y Y
02/21/2015

Interest Rate

0.00

% (apr)

Secured:

☐

Yes

☒

No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS This Period (last page in this line only)..... ►

21000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 40 OF 41

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

KAIFESH FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Larry KaifeshNature of Debt (Purpose):
Newspaper AdvertisementMailing Address 869 E Schaumburg Rd
#377City State Zip Code
Schaumburg IL 60194

Outstanding Balance Beginning This Period

1738.80

Transaction ID : SD10.6415

Amount Incurred This Period

0.00

Payment This Period

1738.80

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Winning Systems Inc.Nature of Debt (Purpose):
Fundraising consulting feeMailing Address 105 S. York Road
5th floorCity State Zip Code
Elmhurst IL 60126

Outstanding Balance Beginning This Period

1800.00

Transaction ID : SD10.5561

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1800.00

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) ▶

1800.00

2) **TOTALS** This Period (last page this line number only) ▶

1800.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

21000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

22800.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SD10
Transaction ID : SD10.5561
In dispute

Form/Schedule:
Transaction ID: