

# 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  
Quigley for Congress

ADDRESS (number and street) 2652 N Southport Avenue  
 Check if different than previously reported. (ACC) Unit E  
Chicago IL 60614

2. **FEC IDENTIFICATION NUMBER** ▼ C C00457556 CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) STATE ▼ DISTRICT  
IL 05

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 MM / DD / YYYY in the State of      
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on MM / DD / YYYY in the State of    

5. Covering Period MM / DD / YYYY through MM / DD / YYYY  
02 / 25 / 2016 through 03 / 31 / 2016

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 Erica Kelly

Signature of Treasurer Erica Kelly *[Electronically Filed]* Date MM / DD / YYYY  
04 / 15 / 2016

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Quigley for Congress**

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

	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))....	71500.00	699128.01
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	71500.00	699128.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	26836.96	361665.54
(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)).....	26836.96	361665.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	712089.63	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**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)

Write or Type Committee Name

**Quigley for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 02 / 25 / 2016 To: M M / D D / Y Y Y Y 03 / 31 / 2016

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	18200.00	309775.11
(ii) Unitemized.....	800.00	18877.90
(iii) TOTAL of contributions from individuals ▶	19000.00	328653.01
(b) Political Party Committees.....	0.00	150.00
(c) Other Political Committees (such as PACs).....	52500.00	370325.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	71500.00	699128.01
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	142.73
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	71500.00	699270.74

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	26836.96	361665.54
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	15000.00
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 .....	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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	31000.00	103875.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	57836.96	480540.54

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	698426.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	71500.00
25. SUBTOTAL (add Line 23 and Line 24).....	769926.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	57836.96
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	712089.63

**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 5 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Bennett**

Mailing Address 5353 N Magnolia Ave

City Chicago State IL Zip Code 60640-2204

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

Name of Employer: Lambda Legal Occupation: Regional Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 03 / 24 / 2016

**Transaction ID : C4635216**

Amount of Each Receipt this Period: 400.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**John L. Borovicka**

Mailing Address 1020 W. Roscoe St. Unit 1W

City Chicago State IL Zip Code 60657

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

Name of Employer: Alexander & Borovicka Occupation: Government Solutions

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 08 / 2016

**Transaction ID : C4630757**

Amount of Each Receipt this Period: 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**kathy byrne**

Mailing Address 1448 N Lake Shore Dr

City Chicago State IL Zip Code 60610-1798

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

Name of Employer: cooney&conway Occupation: lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 03 / 24 / 2016

**Transaction ID : C4635207**

Amount of Each Receipt this Period: 1500.00

Memo Item

**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: (check only one)	PAGE 6 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Cocagne**

Mailing Address 3237 N. Leavitt

City Chicago State IL Zip Code 60618

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

Name of Employer Vermilion Development Occupation President & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2016

**Transaction ID : C4629122**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Patrick Croke**

Mailing Address 1701 N North Park Ave

City Chicago State IL Zip Code 60614-6377

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

Name of Employer Sidley Austin Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629271**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Rajiv K Fernando**

Mailing Address 2109 N Damen Ave

City Chicago State IL Zip Code 60647

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

Name of Employer Chopper Trading Occupation Trader

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2016

**Transaction ID : C4635151**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 7 OF 35  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Greg Goldner**

Mailing Address 2208 N Cleveland Ave

City Chicago State IL Zip Code 60614-3704

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

Name of Employer Resolute Consulting Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629272**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Howard L. Gottlieb**

Mailing Address 1560 Sherman Ave.  
Suite 1020

City Evanston State IL Zip Code 60201

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

Name of Employer Glenwood Trust Corp Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : C4655734**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Chester R. Kropidowski**

Mailing Address 651 W Sheridan Rd

City Chicago State IL Zip Code 60613-3337

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

Name of Employer None Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2016

**Transaction ID : C4629124**

Amount of Each Receipt this Period  
 200.00

Memo Item

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

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

3400.00

**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 8 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marilyn Labkon**

Mailing Address 635 Driftwood Lane

City Northbrook State IL Zip Code 60062

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

Name of Employer General Iron Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2016

**Transaction ID : C4630758**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Hugh James Mallaney**

Mailing Address 1255 S Michigan Ave

City Chicago State IL Zip Code 60605-3286

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

Name of Employer Illinois Mechanical Sales, LLC Occupation Managing Member

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629278**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Susan Mallaney**

Mailing Address 1255 S Michigan Ave Apt 1908

City Chicago State IL Zip Code 60605-3306

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

Name of Employer Self Employed Occupation Independent Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629277**

Amount of Each Receipt this Period  
1700.00

Memo Item

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

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

3700.00



**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 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alyx Pattison**

Mailing Address 1111 S Western Ave

City Chicago State IL Zip Code 60612-4146

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

Name of Employer Akerman Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629273**

Amount of Each Receipt this Period  
300.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**London Rakestraw**

Mailing Address 501 N Clinton St

City Chicago State IL Zip Code 60654-6589

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

Name of Employer SCR Transportation Occupation VP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2016

**Transaction ID : C4630763**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Sam Sanchez**

Mailing Address 3524 N. Clark St.

City Chicago State IL Zip Code 60657-1612

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

Name of Employer John Barleycorn Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2016

**Transaction ID : C4630761**

Amount of Each Receipt this Period  
1200.00

Memo Item

\* In-Kind: Food and drink for event

**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: (check only one)	PAGE 10 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Matthew Tully**

Mailing Address 33 N. Dearborn  
Suite 2450

City Chicago State IL Zip Code 60602

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

Name of Employer Thomas M. Tully & Assoc. Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2016

**Transaction ID : C4629123**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Moses Mercado**

Mailing Address 1333A Constitution Ave., NE

City Washington State DC Zip Code 20002

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

Name of Employer Ogilvy Government Relations Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : C4655791A**

Amount of Each Receipt this Period  
1000.00

Memo Item

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ActBlue Technical Services**

Mailing Address 14 Arrow St.

City Cambridge State MA Zip Code 02138

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : C4655791AB**

Amount of Each Receipt this Period  
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

1250.00

**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 11 OF 35
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Goldberg Law Group LLC**

Mailing Address 120 S. Riverside Plaza  
Suite 1675

City Chicago State IL Zip Code 60606

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629366**

Amount of Each Receipt this Period  
500.00

Memo Item

PARTNERSHIP--partners below if itemized

**B.** Full Name (Last, First, Middle Initial)  
**Michael K. Goldberg**

Mailing Address Goldberg Law Group  
120 South Riverside

City Chicago State IL Zip Code 60606

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

Name of Employer Occupation  
Goldberg Law Group attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629367**

Amount of Each Receipt this Period  
500.00

Memo Item

\*

**C.** Full Name (Last, First, Middle Initial)  
**Sinson Law Group**

Mailing Address 20 N. Wacker Dr.  
Suite 1010

City Chicago State IL Zip Code 60606

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629368**

Amount of Each Receipt this Period  
250.00

Memo Item

PARTNERSHIP--partners below if itemized

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

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

750.00

**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 35  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kent Sinson**

Mailing Address 1411 W. Grace Street  
4E

City Chicago State IL Zip Code 60613

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

Name of Employer Sinson Law Group Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629369**

Amount of Each Receipt this Period  
250.00

Memo Item

\*

**B.** Full Name (Last, First, Middle Initial)

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

Memo Item

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

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

Memo Item

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

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

0.00

18200.00

**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 13 OF 35
	<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)  
**Quigley for Congress**

**A. AIRLINES FOR AMERICA (A4A) POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 1301 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00114694

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2016

**Transaction ID : C4631367**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B. American Association for Justice**

Full Name (Last, First, Middle Initial)  
Mailing Address 777 6TH STREET, NW SUITE 200

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2016

**Transaction ID : C4631368**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C. AMERICAN FEDERATION OF TEACHERS**

Full Name (Last, First, Middle Initial)  
Mailing Address 555 New Jersey Avenue, NW

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : C4656031**

Amount of Each Receipt this Period  
 2500.00

Memo Item

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

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

4500.00

**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 35  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 325 Seventh Street NW  
Suite 700

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 08 / 2016

**Transaction ID : C4630759**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS**

Mailing Address 220 Leigh Farm Road

City Durham State NC Zip Code 27707

FEC ID number of contributing federal political committee. **C C00077321**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 29 / 2016

**Transaction ID : C4654468**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**American Moving & Storage PAC**

Mailing Address 1611 DUKE STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00255257**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 15 / 2016

**Transaction ID : C4631363**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

4500.00

**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 15 OF 35
	<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)  
**Quigley for Congress**

**A. AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITIC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1300 L Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00010322**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2016

**Transaction ID : C4631364**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. AT&T CORP. POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 208 S. Akard Street Suite 3521

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2016

**Transaction ID : C4654472**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. Barnes & Thornburg PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 11 South Meridian Street

City Indianapolis State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C C00395947**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2016

**Transaction ID : C4654474**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

2500.00

**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 35  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BECERRA FOR CONGRESS**

Mailing Address P.O. BOX 71584

City State Zip Code  
LOS ANGELES CA 90071

FEC ID number of contributing federal political committee. **C C00264101**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

**Transaction ID : C4654469**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CATERPILLAR EMPLOYEE POLITICAL ACTION COMMITTEE, T**

Mailing Address 100 N.E. Adams

City State Zip Code  
Peoria IL 61629

FEC ID number of contributing federal political committee. **C C00148031**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : C4630876**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Chicago Mercantile Exchange Inc PAC**

Mailing Address 20 SOUTH WACKER DRIVE

City State Zip Code  
CHICAGO IL 60606

FEC ID number of contributing federal political committee. **C C00076299**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 15 / 2016

**Transaction ID : C4631362**

Amount of Each Receipt this Period  
2000.00

Memo Item

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

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

6500.00



**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 17 OF 35
	<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)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COMCAST CORP. POLITICAL ACTION COMMITTEE**

Mailing Address 1701 JFK Blvd, 49th Floor

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : C4630877**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ExelonPAC**

Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 400 EAST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2016

**Transaction ID : C4656032**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Friends of Bud Cramer**

Mailing Address P.O. BOX 2621

City HUNTSVILLE State AL Zip Code 35804

FEC ID number of contributing federal political committee. **C C00239038**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2016

**Transaction ID : C4631369**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

3000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 35

(check only one)

<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)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GOOGLE INC. NETPAC**

Mailing Address **1101 NEW YORK AVE NW**  
**SECOND FLOOR**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00428623**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 15 / 2016**

Transaction ID : **C4631365**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**H & R BLOCK POLITICAL ACTION COMMITTEE (BLOCKPAC)**

Mailing Address **ONE H&R BLOCK WAY**

City **KANSAS CITY** State **MO** Zip Code **64105**

FEC ID number of contributing federal political committee. **C C00188177**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 02 / 2016**

Transaction ID : **C4629518**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Holland & Knight Committee for Effective Government**

Mailing Address **2099 Pennsylvania Avenue, N.W.**  
**Suite 100**

City **Washington** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00171330**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 15 / 2016**

Transaction ID : **C4631366**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> 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: (check only one)	PAGE 19 OF 35
	<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)  
**Quigley for Congress**

**A. Honeywell International Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 101 Constitution Avenue NW  
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : C4631168**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B. ILLINOIS BANKPAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1120 Connecticut Avenue NW  
Suite 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2016

**Transaction ID : C4654471**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C. Illinois Corn Growers Association**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1623

City Bloomington State IL Zip Code 61702

FEC ID number of contributing federal political committee. **C C00376590**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2016

**Transaction ID : C4631370**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

3000.00

**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 20 OF 35			
	<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)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LEAGUE OF CONSERVATION VOTERS ACTION FUND**

Mailing Address 1920 L Street, NW, Suite 800

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 15 / 2016

**Transaction ID : C4654470**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 Massachusetts Ave. NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : C4655792**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 Massachusetts Ave. NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : C4655793**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

4000.00

**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 21 OF 35
	<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)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**National Association of Insurance and Financial Advisors**

Mailing Address 2901 TELESTAR CT.

City State Zip Code  
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2016

**Transaction ID : C4631166**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Navistar Inc., Good Government Committee**

Mailing Address 4201 Winfield Road, P.O. Box 1488

City State Zip Code  
Warrenville IL 60555

FEC ID number of contributing federal political committee. **C** C00040840

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629364**

Amount of Each Receipt this Period  
3000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Navistar Inc., Good Government Committee**

Mailing Address 4201 Winfield Road, P.O. Box 1488

City State Zip Code  
Warrenville IL 60555

FEC ID number of contributing federal political committee. **C** C00040840

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : C4629365**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

6000.00

**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 22 OF 35
<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)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 929 Long Bridge Dr.

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016

**Transaction ID : C4656033**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TTX COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 101 N WACKER DRIVE

City State Zip Code  
CHICAGO IL 60606

FEC ID number of contributing federal political committee. **C** C00138974

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 14 / 2016

**Transaction ID : C4631167**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)**

Mailing Address 677 WASHINGTON BOULEVARD  
C/O PER DYRVIK

City State Zip Code  
STAMFORD CT 06901

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2016

**Transaction ID : C4630874**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

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

5000.00

**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 23 OF 35
	<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)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNI**

Mailing Address 1775 K STREET, N.W.

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00002766

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 08 / 2016

**Transaction ID : C4630756**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**VERIZON COMMUNICATIONS INC POLITICAL ACTION COMMIT**

Mailing Address 1300 I STREET NW SUITE 400 WEST

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00025163

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2016

**Transaction ID : C4654473**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Wal-Mart Stores PAC for Responsible Government**

Mailing Address 702 S.W. 8TH STREET

City BENTONVILLE State AR Zip Code 72716

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2016

**Transaction ID : C4631361**

Amount of Each Receipt this Period  
 2000.00

Memo Item

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

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

8000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 35  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINE AND SPIRITS WHOLESALERS OF AMERICA INC. POLIT**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2016  
 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  
 03 / 09 / 2016

**Transaction ID : C4630875**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)

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

Memo Item

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

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

Memo Item

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

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

2500.00

52500.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 398.13
City Atlanta	State GA Zip Code 30353-6216	
Purpose of Disbursement Mobile Phones	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : D267674</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 35.78
City Atlanta	State GA Zip Code 30353-6216	
Purpose of Disbursement Mobile Phones	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : D270609</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 35.78
City Atlanta	State GA Zip Code 30353-6216	
Purpose of Disbursement Mobile Phones	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : D270610</b>
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	469.69
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 35			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 35.78 <input type="checkbox"/> Memo Item
City Atlanta State GA Zip Code 30353-6216	Purpose of Disbursement Mobile Phones Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : D270611</b>

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 35.78 <input type="checkbox"/> Memo Item
City Atlanta State GA Zip Code 30353-6216	Purpose of Disbursement Mobile Phones Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : D270612</b>

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 35.78 <input type="checkbox"/> Memo Item
City Atlanta State GA Zip Code 30353-6216	Purpose of Disbursement Mobile Phones Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : D270613</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	107.34
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 35			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 35.78
City Atlanta State GA Zip Code 30353-6216	Purpose of Disbursement Mobile Phones 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : D270614</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 35.78
City Atlanta State GA Zip Code 30353-6216	Purpose of Disbursement Mobile Phones 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : D270615</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address PO Box 536216		Amount of Each Disbursement this Period 35.78
City Atlanta State GA Zip Code 30353-6216	Purpose of Disbursement Mobile Phones 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : D270616</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	107.34
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 35			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address PO Box 536216			Amount of Each Disbursement this Period 35.78
City Atlanta	State GA	Zip Code 30353-6216	
Purpose of Disbursement Mobile Phones		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Transaction ID : D270617</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2016
Mailing Address PO Box 536216			Amount of Each Disbursement this Period 35.78
City Atlanta	State GA	Zip Code 30353-6216	
Purpose of Disbursement Mobile Phones		Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Transaction ID : D270618</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Democratic Party of Illinois</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2016
Mailing Address P.O. BOX 518			Amount of Each Disbursement this Period 2000.00
City Springfield	State IL	Zip Code 62705	
Purpose of Disbursement Voter File		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Transaction ID : D271079</b>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2071.56
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 35	
	<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)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. Erica Kelly</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 916 W. Fletcher Street		Amount of Each Disbursement this Period 2600.00
City Chicago	State IL Zip Code 60657	
Purpose of Disbursement Fundraising Consultant	Category/Type 003	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : D270623</b>
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Erica Kelly</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2016
Mailing Address 916 W. Fletcher Street		Amount of Each Disbursement this Period 26.02
City Chicago	State IL Zip Code 60657	
Purpose of Disbursement Reimbursement - Postage	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : D267671</b>
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Erickson and Company</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2016
Mailing Address 38 Ivy St, SE		Amount of Each Disbursement this Period 3538.02
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Fundraising Consultant	Category/Type 003	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : D270746</b>
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6164.04
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 35			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. Erickson and Company</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2016	
Mailing Address 38 Ivy St, SE			Amount of Each Disbursement this Period 3533.46	
City Washington	State DC	Zip Code 20003	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising Consultant		Category/Type 003		
Candidate Name			Transaction ID : D267740	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2016	
Mailing Address 1601 Willow Rd			Amount of Each Disbursement this Period 402.56	
City Menlo Park	State CA	Zip Code 94025	Memo Item <input type="checkbox"/>	
Purpose of Disbursement On-line Advertising		Category/Type 004		
Candidate Name			Transaction ID : D270621	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016	
Mailing Address 1601 Willow Rd			Amount of Each Disbursement this Period 253.08	
City Menlo Park	State CA	Zip Code 94025	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Online Advertising		Category/Type 004		
Candidate Name			Transaction ID : D267673	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4189.10
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. Merchant Card Processing</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address 890 Mountain Ave		Amount of Each Disbursement this Period 8.94
City New Providence	State NJ	
Zip Code 07974	Purpose of Disbursement Credit Card Processing Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : D267735</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Merchant Card Processing</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address 890 Mountain Ave		Amount of Each Disbursement this Period 29.47
City New Providence	State NJ	
Zip Code 07974	Purpose of Disbursement Credit Card Processing Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : D267736</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Merchant Card Processing</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2016
Mailing Address 890 Mountain Ave		Amount of Each Disbursement this Period 153.58
City New Providence	State NJ	
Zip Code 07974	Purpose of Disbursement Credit Card Processing Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	<b>Transaction ID : D267672</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	191.99
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. New Chicago Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 09 / 2016</b>
Mailing Address 1040 West Adams, Unit 428		Amount of Each Disbursement this Period <b>8750.00</b>
City Chicago State IL Zip Code 60607	Purpose of Disbursement Fundraising Consultant	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type <b>003</b>	<b>Transaction ID : D270624</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot #225</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2016</b>
Mailing Address 2928 N. Ashland Ave		Amount of Each Disbursement this Period <b>594.59</b>
City Chicago State IL Zip Code 60657	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : D270766</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. Sam Sanchez</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 08 / 2016</b>
Mailing Address 3524 N. Clark St.		Amount of Each Disbursement this Period <b>1200.00</b>
City Chicago State IL Zip Code 60657-1612	Purpose of Disbursement Food and drink for event	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : D267703</b> * In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>10544.59</b>
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sonco</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2016
Mailing Address 2050 E. Devon Ave.		Amount of Each Disbursement this Period 500.00
City Elk Grove Village	State IL Zip Code 60007	
Purpose of Disbursement Office Rent	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : D267739</b>
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. United Center Executive Suites</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2016
Mailing Address 1901 West Madison St		Amount of Each Disbursement this Period 1746.67
City Chicago	State IL Zip Code 60612	
Purpose of Disbursement Fundraising Event	Category/Type 003	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : D267675</b>
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2016
Mailing Address 209 S LaSalle		Amount of Each Disbursement this Period 255.18
City Chicago	State IL Zip Code 60604	
Purpose of Disbursement Mobile Phones	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : D267738</b>
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2501.85
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 35			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. Whole Foods</b>		Date of Disbursement MM / DD / YYYY 03 / 22 / 2016
Mailing Address 3640 N. Halsted St.		Amount of Each Disbursement this Period 212.97
City Chicago	State IL Zip Code 60613	
Purpose of Disbursement Fundraising - Catering	Category/Type 003	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : D270620</b>
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	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)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	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)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	212.97
<b>TOTAL</b> This Period (last page this line number only).....	26560.47

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 35	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Quigley for Congress**

Full Name (Last, First, Middle Initial) <b>A. SCHNEIDER FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 29 / 2016</b>
Mailing Address <b>PO BOX 1318</b>		Amount of Each Disbursement this Period <b>1000.00</b> <input type="checkbox"/> Memo Item <b>Transaction ID : D270854</b>
City <b>DEERFIELD</b> State <b>IL</b> Zip Code <b>60015</b>	Purpose of Disbursement Contribution Category/Type <b>011</b>	
Candidate Name <b>BRADLEY SCOTT SCHNEIDER</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>IL</b> District: <b>10</b>		

Full Name (Last, First, Middle Initial) <b>B. Democratic Congressional Campaign Comm.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 14 / 2016</b>
Mailing Address <b>430 S. Capitol St. SE</b>		Amount of Each Disbursement this Period <b>30000.00</b> <input type="checkbox"/> Memo Item <b>Transaction ID : D270622</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003</b>	Purpose of Disbursement Unlimited Transfer to National Party Committee Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period  <input type="checkbox"/> Memo Item
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>31000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>31000.00</b>