

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
Schock for Congress

ADDRESS (number and street) PO Box 10555
 Check if different than previously reported. (ACC) Peoria IL 61612

2. **FEC IDENTIFICATION NUMBER** C C00437756 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) IL 18

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 in the State of
(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 through M M / D D / Y Y Y Y

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 Paul Kilgore
Signature of Treasurer Paul Kilgore *[Electronically Filed]* Date M M / D D / Y Y Y Y

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
Schock 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))....	0.00	140673.64
(b) Total Contribution Refunds (from Line 20(d))	59825.00	64925.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-59825.00	75748.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1140314.18	1444015.19
(b) Total Offsets to Operating Expenditures (from Line 14).....	27159.78	36572.45
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1113154.40	1407442.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2110715.91	
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).....	746985.45	

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

Schock for Congress

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

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).....	0.00	73700.00
(ii) Unitemized.....	0.00	10400.00
(iii) TOTAL of contributions from individuals ▶	0.00	84100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	56573.64
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	140673.64
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	33882.71
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	27159.78	36572.45
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	62191.32	71288.89
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	89351.10	282417.69

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1140314.18	1444015.19
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	250.00
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	53825.00	58925.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	6000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	59825.00	64925.00
21. OTHER DISBURSEMENTS	-100.00	21600.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1200039.18	1530790.19

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3221403.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	89351.10
25. SUBTOTAL (add Line 23 and Line 24).....	3310755.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1200039.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2110715.91

**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 58
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Schock for Congress

A. Full Name (Last, First, Middle Initial)
White Elephant Hotel

Mailing Address 50 Easton St

City State Zip Code
Nantucket MA 02554-2258

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : AE06D806164F4491D85C

Amount of Each Receipt this Period
 4000.00

Refund

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

Mailing Address 6310 N University St

City State Zip Code
Peoria IL 61614-3483

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2015

Transaction ID : A3B8A3EC66C2B4662981

Amount of Each Receipt this Period
 560.59

Refund

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

Mailing Address 6310 N University St

City State Zip Code
Peoria IL 61614-3483

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2015

Transaction ID : A07BA5A5984314179A52

Amount of Each Receipt this Period
 459.74

Refund

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

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

5020.33

**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 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Schock for Congress

A. Full Name (Last, First, Middle Initial)
GOP Generation Y Fund

Mailing Address PO Box 9055

City Peoria State IL Zip Code 61612

FEC ID number of contributing federal political committee. **C** C00448191

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22081.92

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2015

Transaction ID : A7DCCCB7A49BF4BA8AE2

Amount of Each Receipt this Period
 22081.92

Reimburse The Little Nell Exp(5/5/2015)

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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 / 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).....

22081.92

27102.25

**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 58
(check only one)
 11a 11b 11c 11d 15
 12 13a 13b 14

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NAME OF COMMITTEE (In Full)
Schock for Congress

A. Full Name (Last, First, Middle Initial)
CEFCU Citizens Equity Federal Credit Union

Mailing Address **PO Box 1715**

City **Peoria** State **IL** Zip Code **61656-1715**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9669.17

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2015

Transaction ID : AACFC33F2082A4530B3F

Amount of Each Receipt this Period
571.60

Bank Interest

B. Full Name (Last, First, Middle Initial)
Green Chevrolet

Mailing Address **1703 Avenue of the Cities**

City **East Moline** State **IL** Zip Code **61244-4172**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
46000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 06 / 2015

Transaction ID : A79BDC8673F4C4D8C940

Amount of Each Receipt this Period
46000.00

Proceeds-Campaign Vehicle Sale

C. Full Name (Last, First, Middle Initial)
CEFCU Citizens Equity Federal Credit Union

Mailing Address **PO Box 1715**

City **Peoria** State **IL** Zip Code **61656-1715**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10788.89

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : A0F3BA40F96374C58AAD

Amount of Each Receipt this Period
1.13

Bank Interest

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

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

46572.73

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

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

FOR LINE NUMBER: PAGE 8 OF 58
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Schock for Congress

A. Full Name (Last, First, Middle Initial)
CEFCU Citizens Equity Federal Credit Union

Mailing Address PO Box 1715

City Peoria State IL Zip Code 61656-1715

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10787.76

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2015

Transaction ID : AE79BA0CE1C4E496FACB

Amount of Each Receipt this Period
445.97

Bank Interest

B. Full Name (Last, First, Middle Initial)
Green Chevrolet

Mailing Address 1703 Avenue of the Cities

City East Moline State IL Zip Code 61244-4172

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
60500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 09 / 2015

Transaction ID : ADBDC063572BA4FBABE1

Amount of Each Receipt this Period
14500.00

Proceeds-Campaign Vehicle Sale

C. Full Name (Last, First, Middle Initial)
CEFCU Citizens Equity Federal Credit Union

Mailing Address PO Box 1715

City Peoria State IL Zip Code 61656-1715

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9670.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : A5989F9CEA2E34729905

Amount of Each Receipt this Period
1.13

Bank Interest

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

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

14947.10

**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 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Schock for Congress

A. Full Name (Last, First, Middle Initial)
CEFCU Citizens Equity Federal Credit Union

Mailing Address PO Box 1715

City Peoria State IL Zip Code 61656-1715

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10341.79

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2015

Transaction ID : A41F937687B1C44F9845

Amount of Each Receipt this Period
1.17

Bank Interest

B. Full Name (Last, First, Middle Initial)
CEFCU Citizens Equity Federal Credit Union

Mailing Address PO Box 1715

City Peoria State IL Zip Code 61656-1715

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10340.62

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : A96666E3338304213921

Amount of Each Receipt this Period
670.32

Bank Interest

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 / 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).....

671.49

62191.32

**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 10 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Lisa Wagner and Co.		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 102 N Cross St Ste 6		Amount of Each Disbursement this Period -79.08 Transaction ID : B7ABDDF3024654DDEB76
City Wheaton State IL Zip Code 60187-5348	Purpose of Disbursement Void of Previous-Expense not Owed	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Brenda L Taylor Davies		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 5500 N Ramblewood Ct		Amount of Each Disbursement this Period -9.53 Transaction ID : BE730C547F9FB46BCB50
City Peoria State IL Zip Code 61615-3235	Purpose of Disbursement Void of Previous-Duplicate Payment	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. Newtek Merchant Solution		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015
Mailing Address 744 N 4th St		Amount of Each Disbursement this Period 62.80 Transaction ID : B0C82512410AC4D7B981
City Milwaukee State WI Zip Code 53203-2112	Purpose of Disbursement CC Transaction Fees	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	-25.81
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 Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Berliner Corcoran and Rowe LLP			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2015	
Mailing Address 1101 17th St NW, Ste 1100			Amount of Each Disbursement this Period 20000.00	
City Washington	State DC	Zip Code 20036-4740	Transaction ID : B5D8CD90D43FA4460B28	
Purpose of Disbursement Legal Fees		Category/ Type		
Candidate Name				
Office Sought:	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:			

Full Name (Last, First, Middle Initial) B. Intuit			Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2015	
Mailing Address 2632 Marine Way			Amount of Each Disbursement this Period 49.94	
City Mountain View	State CA	Zip Code 94043-1126	Transaction ID : B50FE5C5ABAF5411CB8E	
Purpose of Disbursement Payroll Fees		Category/ Type		
Candidate Name				
Office Sought:	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:			

Full Name (Last, First, Middle Initial) c. Verizon			Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015	
Mailing Address 255 Parkshore Dr			Amount of Each Disbursement this Period 584.30	
City Folsom	State CA	Zip Code 95630-4716	Transaction ID : B4878088B03084B3B836	
Purpose of Disbursement Telephone		Category/ Type		
Candidate Name				
Office Sought:	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:			

SUBTOTAL of Disbursements This Page (optional).....	20634.24
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 Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015	
Mailing Address 300 1st St SE			Amount of Each Disbursement this Period 80.00	
City Washington	State DC	Zip Code 20003-1801	Transaction ID : B9D877452FE5D42E2A45	
Purpose of Disbursement Membership Dues/Meals		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:				

Full Name (Last, First, Middle Initial) B. Aristotle			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015	
Mailing Address 205 Pennsylvania Ave SE			Amount of Each Disbursement this Period 1725.00	
City Washington	State DC	Zip Code 20003-1164	Transaction ID : B966D4A1E283A460BA0A	
Purpose of Disbursement Software		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:				

Full Name (Last, First, Middle Initial) c. Red River Co, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015	
Mailing Address PO Box 21027			Amount of Each Disbursement this Period 9815.84	
City Washington	State DC	Zip Code 20009-0527	Transaction ID : B11F12A9B100E49A68A2	
Purpose of Disbursement Fundraising Consulting		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:				

SUBTOTAL of Disbursements This Page (optional).....	11620.84
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 Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 58	
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Accurate Word LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 4481 White Plains Ln		Amount of Each Disbursement this Period 421.40 Transaction ID : B4C0D3DB27C9E4DCD890
City White Plains	State MD	
Zip Code 20695-3018	Purpose of Disbursement Printing	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:	

Full Name (Last, First, Middle Initial) B. Ginoli & Company, Ltd.		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 7625 N University St Ste A		Amount of Each Disbursement this Period 100.00 Transaction ID : B0F68B3A2DF1743478D6
City Peoria	State IL	
Zip Code 61614-8303	Purpose of Disbursement Tax Preparation	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:	

Full Name (Last, First, Middle Initial) C. Comcast		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 3116 N Dries Ln		Amount of Each Disbursement this Period 215.16 Transaction ID : B594D872FEDA94CBABE9
City Peoria	State IL	
Zip Code 61604-1278	Purpose of Disbursement Internet/Phone	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:	

SUBTOTAL of Disbursements This Page (optional).....	736.56
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 Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Upstream Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1609 Shoal Creek Blvd Ste 203		Amount of Each Disbursement this Period 263.00 Transaction ID : BCAA55E603C74A708A3
City Austin State TX Zip Code 78701-1022	Purpose of Disbursement Web Development/E-Marketing	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address PO Box 727		Amount of Each Disbursement this Period 83.89 Transaction ID : BD1DED76417EB4C13891
City Memphis State TN Zip Code 38194-0001	Purpose of Disbursement Shipping	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. Lane and Waterman		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2015
Mailing Address 220 N Main St, Ste 600		Amount of Each Disbursement this Period 15000.00 Transaction ID : BCDF90BDF25B844CCAF1
City Davenport State IA Zip Code 52801-1953	Purpose of Disbursement Legal Fees	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	15346.89
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 Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 58	
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address 111 Constitution Ave NE		Amount of Each Disbursement this Period 5664.08 Transaction ID : B3CF59013FC5545AFBFB
City Washington State DC Zip Code 20002-5607	Purpose of Disbursement Taxes	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Berliner Corcoran and Rowe LLP		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address 1101 17th St NW, Ste 1100		Amount of Each Disbursement this Period 40605.14 Transaction ID : B1AAAC1D27E714FC195F
City Washington State DC Zip Code 20036-4740	Purpose of Disbursement Legal Fees	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address PO Box 727		Amount of Each Disbursement this Period 99.43 Transaction ID : BF871BAF99BBA4A72816
City Memphis State TN Zip Code 38194-0001	Purpose of Disbursement Shipping	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	46368.65
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 Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Illinois Dept. of Revenue		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address 101 W Jefferson St		Amount of Each Disbursement this Period 777.77 Transaction ID : BB36DCA84512749B695A
City Springfield	State IL Zip Code 62702-5145	
Purpose of Disbursement Taxes	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:		

Full Name (Last, First, Middle Initial) B. Illinois Dept of Employment Security		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2015
Mailing Address 33 S State St		Amount of Each Disbursement this Period 161.34 Transaction ID : BC3976343FD3E412CB99
City Chicago	State IL Zip Code 60603-2804	
Purpose of Disbursement Taxes	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:		

Full Name (Last, First, Middle Initial) C. Ameren Cilco		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015
Mailing Address PO Box 66826		Amount of Each Disbursement this Period 44.58 Transaction ID : B841946EC89904587817
City Saint Louis	State MO Zip Code 63166-6826	
Purpose of Disbursement Utilities	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:		

SUBTOTAL of Disbursements This Page (optional).....	983.69
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 Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Professional Data Services, Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015
Mailing Address 2470 Daniels Bridge Rd Ste 121		Amount of Each Disbursement this Period 1504.76 Transaction ID : B1DB1D68619AD4FAF98D
City Athens	State GA Zip Code 30606-6191	
Purpose of Disbursement Compliance Consulting	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:		

Full Name (Last, First, Middle Initial) B. NHS Property Management		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015
Mailing Address 810 W Trailcreek Dr		Amount of Each Disbursement this Period 709.94 Transaction ID : BCE46144CE72149A5AF6
City Peoria	State IL Zip Code 61614-1862	
Purpose of Disbursement Rent Expense/Utilities	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:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015
Mailing Address PO Box 727		Amount of Each Disbursement this Period 56.67 Transaction ID : B82AEB91FC2A548B28D6
City Memphis	State TN Zip Code 38194-0001	
Purpose of Disbursement Shipping	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:		

SUBTOTAL of Disbursements This Page (optional).....	2271.37
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 Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. RK Dixon		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015
Mailing Address 5700 Utica Ridge Rd		Amount of Each Disbursement this Period 286.17 Transaction ID : B8105ED47229F41E1B22
City Davenport	State IA Zip Code 52807-2943	
Purpose of Disbursement Office Equipment Maintenance	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Karen C Haney		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 5502 N Ramblewood Ct		Amount of Each Disbursement this Period 4968.37 Transaction ID : B74796BD6789B4D909EC
City Peoria	State IL Zip Code 61615-3235	
Purpose of Disbursement Salary	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Mr. Shea A. Ledford		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 4213 N Wycliffe Rd		Amount of Each Disbursement this Period 1243.86 Transaction ID : B394620819FBB410F81A
City Peoria	State IL Zip Code 61614-7436	
Purpose of Disbursement Salary	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6498.40
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 Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Newtek Merchant Solution		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 744 N 4th St		Amount of Each Disbursement this Period 62.80 Transaction ID : BE62A98FE174C4C488F5
City Milwaukee	State WI	
Zip Code 53203-2112	Purpose of Disbursement CC Transaction Fees	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:	

Full Name (Last, First, Middle Initial) B. Intuit		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 49.94 Transaction ID : BB8875CE96929439392F
City Mountain View	State CA	
Zip Code 94043-1126	Purpose of Disbursement Payroll Fees	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:	

Full Name (Last, First, Middle Initial) c. The Little Nell		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 675 East Durant Ave		Amount of Each Disbursement this Period 22081.92 Transaction ID : B51CA60B294E0422E9ED
City Aspen	State CO	
Zip Code 81611-2001	Purpose of Disbursement Event Facility Rental	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:	

SUBTOTAL of Disbursements This Page (optional).....	22194.66
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 Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 255 Parkshore Dr		Amount of Each Disbursement this Period 659.06 Transaction ID : B9CF9E5F7E7F0467FB49
City Folsom State CA Zip Code 95630-4716	Purpose of Disbursement Telephone 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:	Category/Type	

Full Name (Last, First, Middle Initial) B. McGuireWoods LLP		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 2001 K Street NW Suite 400		Amount of Each Disbursement this Period 500000.00 Transaction ID : B946C1C2B9F8D475BA28
City Washington State DC Zip Code 20006-1040	Purpose of Disbursement Legal Consulting 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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Berliner Corcoran and Rowe LLP		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 1101 17th St NW, Ste 1100		Amount of Each Disbursement this Period 20000.00 Transaction ID : B3486CF690CF84D3A9E9
City Washington State DC Zip Code 20036-4740	Purpose of Disbursement Legal Fees 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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	520659.06
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 Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Upstream Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 1609 Shoal Creek Blvd Ste 203		Amount of Each Disbursement this Period 388.00 Transaction ID : B9E76B69EC9A94F16938
City Austin State TX Zip Code 78701-1022	Purpose of Disbursement Web Development/E-Marketing	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Berliner Corcoran and Rowe LLP		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 1101 17th St NW, Ste 1100		Amount of Each Disbursement this Period 90533.89 Transaction ID : BD0448A33923243668AC
City Washington State DC Zip Code 20036-4740	Purpose of Disbursement Legal Fees	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) c. Upstream Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 1609 Shoal Creek Blvd Ste 203		Amount of Each Disbursement this Period 135.31 Transaction ID : BE6973F322CB64F6EBB6
City Austin State TX Zip Code 78701-1022	Purpose of Disbursement Web Development/E-Marketing	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	91057.20
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 Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 58	
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. NHS Property Management		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2015
Mailing Address 810 W Trailcreek Dr		Amount of Each Disbursement this Period 697.92 Transaction ID : BE8DDE53DBEDD402D91C
City Peoria	State IL Zip Code 61614-1862	
Purpose of Disbursement Rent Expense/Utilities		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:		

Full Name (Last, First, Middle Initial) B. Ameren Cilco		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address PO Box 66826		Amount of Each Disbursement this Period 41.30 Transaction ID : BF816EF5283B84FFFA48
City Saint Louis	State MO Zip Code 63166-6826	
Purpose of Disbursement Utilities		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:		

Full Name (Last, First, Middle Initial) C. Comcast		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 3116 N Dries Ln		Amount of Each Disbursement this Period 296.37 Transaction ID : BEB88491903F54B42A12
City Peoria	State IL Zip Code 61604-1278	
Purpose of Disbursement Internet/Phone		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:		

SUBTOTAL of Disbursements This Page (optional).....	1035.59
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 Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 58	
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. The Bopp Law Firm, PC		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2015
Mailing Address 1 S 6th St		Amount of Each Disbursement this Period 25000.00 Transaction ID : B6F3EB033E9594EF8A46
City Terre Haute	State IN	
Zip Code 47807-3510	Purpose of Disbursement Legal Fees	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:	

Full Name (Last, First, Middle Initial) B. Karen C Haney		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 5502 N Ramblewood Ct		Amount of Each Disbursement this Period 4968.37 Transaction ID : BA64AEC04EB084EAE918
City Peoria	State IL	
Zip Code 61615-3235	Purpose of Disbursement Salary	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:	

Full Name (Last, First, Middle Initial) C. RK Dixon		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 5700 Utica Ridge Rd		Amount of Each Disbursement this Period 286.17 Transaction ID : B10ADC3227D374FE4BC4
City Davenport	State IA	
Zip Code 52807-2943	Purpose of Disbursement Office Equipment Maintenance	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:	

SUBTOTAL of Disbursements This Page (optional).....	30254.54
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 Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Newtek Merchant Solution		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address 744 N 4th St		Amount of Each Disbursement this Period 62.80 Transaction ID : B7FC765E89FAE4E55A23
City Milwaukee	State WI	
Purpose of Disbursement CC Transaction Fees		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: _____	

Full Name (Last, First, Middle Initial) B. Intuit		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2015
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 45.69 Transaction ID : BBB0CC54F53D4415C89C
City Mountain View	State CA	
Purpose of Disbursement Payroll Fees		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: _____	

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 111 Constitution Ave NE		Amount of Each Disbursement this Period 2272.92 Transaction ID : B2427D8A856F84066942
City Washington	State DC	
Purpose of Disbursement Taxes		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: _____	

SUBTOTAL of Disbursements This Page (optional).....	2381.41
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 Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 58	
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. NHS Property Management		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 810 W Trailcreek Dr		Amount of Each Disbursement this Period 664.94
City Peoria	State IL Zip Code 61614-1862	
Purpose of Disbursement Rent Expense/Utilities	Category/Type	Transaction ID : BFD9A577661344043A91
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:		

Full Name (Last, First, Middle Initial) B. Berliner Corcoran and Rowe LLP		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 1101 17th St NW, Ste 1100		Amount of Each Disbursement this Period 8682.21
City Washington	State DC Zip Code 20036-4740	
Purpose of Disbursement Legal Fees	Category/Type	Transaction ID : B057317E258A145D4827
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:		

Full Name (Last, First, Middle Initial) c. Illinois Dept. of Revenue		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 101 W Jefferson St		Amount of Each Disbursement this Period 306.25
City Springfield	State IL Zip Code 62702-5145	
Purpose of Disbursement Taxes	Category/Type	Transaction ID : BCA967DCB3AB746EB9F8
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:		

SUBTOTAL of Disbursements This Page (optional).....	9653.40
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 Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 58	
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Berliner Corcoran and Rowe LLP		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 1101 17th St NW, Ste 1100		Amount of Each Disbursement this Period 100000.00 Transaction ID : BD362EE7A176E4307B5F
City Washington State DC Zip Code 20036-4740	Purpose of Disbursement Legal Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Berke Farah LLP		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 1200 New Hampshire Ave NW, Ste 800		Amount of Each Disbursement this Period 3481.00 Transaction ID : BA7122523ABB74D71862
City Washington State DC Zip Code 20036-6805	Purpose of Disbursement Legal Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Comcast		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 3116 N Dries Ln		Amount of Each Disbursement this Period 285.62 Transaction ID : B7CD2C16845874F50BBC
City Peoria State IL Zip Code 61604-1278	Purpose of Disbursement Internet/Phone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	103766.62
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 Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Upstream Communications			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 1609 Shoal Creek Blvd Ste 203			Amount of Each Disbursement this Period 263.00 Transaction ID : BB7AF47911E894DD78C9
City Austin	State TX	Zip Code 78701-1022	
Purpose of Disbursement Web Development/E-Marketing		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:			

Full Name (Last, First, Middle Initial) B. Blank Rome LLP			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 600 New Hampshire Ave NW			Amount of Each Disbursement this Period 50000.00 Transaction ID : BC69B349999CE430BAD5
City Washington	State DC	Zip Code 20037-2403	
Purpose of Disbursement Legal Fees		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:			

Full Name (Last, First, Middle Initial) C. Professional Data Services, Inc			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 2470 Daniels Bridge Rd Ste 121			Amount of Each Disbursement this Period 1531.43 Transaction ID : BF64599E03AFA427EAF6
City Athens	State GA	Zip Code 30606-6191	
Purpose of Disbursement Compliance Consulting		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:			

SUBTOTAL of Disbursements This Page (optional).....	51794.43
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 Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Berliner Corcoran and Rowe LLP			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 1101 17th St NW, Ste 1100			Amount of Each Disbursement this Period 53807.39 Transaction ID : BD1E48AC06BA043A4BB7
City Washington	State DC	Zip Code 20036-4740	
Purpose of Disbursement Legal Fees		Candidate Name	Category/ Type
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:	

Full Name (Last, First, Middle Initial) B. JJ Jackson Consulting, Inc.			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015
Mailing Address 1407 N Nash St			Amount of Each Disbursement this Period 25000.00 Transaction ID : BBE4F4545753543A2BC6
City Arlington	State VA	Zip Code 22209-4600	
Purpose of Disbursement Legal Fees		Candidate Name	Category/ Type
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:	

Full Name (Last, First, Middle Initial) C. Country Mutual Insurance Company			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2015
Mailing Address PO Box 2100			Amount of Each Disbursement this Period 34.75 Transaction ID : B26CF786D967D484B811
City Bloomington	State IL	Zip Code 61702-2100	
Purpose of Disbursement Property Insurance		Candidate Name	Category/ Type
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:	

SUBTOTAL of Disbursements This Page (optional).....	78842.14
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 Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. FedEx		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2015
Mailing Address PO Box 727		Amount of Each Disbursement this Period 32.29
City Memphis	State TN	
Zip Code 38194-0001	Purpose of Disbursement Shipping	Transaction ID : B66119EAEE242457D939
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) B. PTC Select		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2015
Mailing Address 2450 N Knoxville Ave		Amount of Each Disbursement this Period 62.79
City Peoria	State IL	
Zip Code 61604-3620	Purpose of Disbursement Office Supplies	Transaction ID : B31E1440C0BFB4D12A00
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) c. Schertler and Onorato, LLP		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 575 7th St NW, Ste 300 S		Amount of Each Disbursement this Period 20000.00
City Washington	State DC	
Zip Code 20004-1611	Purpose of Disbursement Legal Fees	Transaction ID : BA75FA24BECAF47F7A42
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	20095.08
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 Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Lane and Waterman		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address 220 N Main St, Ste 600		Amount of Each Disbursement this Period 76038.18 Transaction ID : BCA2C7A8F2F4D48EEB50
City Davenport State IA Zip Code 52801-1953	Purpose of Disbursement Legal Fees	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. RK Dixon		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address 5700 Utica Ridge Rd		Amount of Each Disbursement this Period 286.17 Transaction ID : B910AC17A9C2B4771B29
City Davenport State IA Zip Code 52807-2943	Purpose of Disbursement Office Equipment Maintenance	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. FedEx		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2015
Mailing Address PO Box 727		Amount of Each Disbursement this Period 122.47 Transaction ID : B18D7D24286454635B20
City Memphis State TN Zip Code 38194-0001	Purpose of Disbursement Shipping	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	76446.82
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 Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement MM / DD / YYYY 06 / 29 / 2015
Mailing Address 255 Parkshore Dr		Amount of Each Disbursement this Period 144.35 Transaction ID : B964EEDABAF394AE99C
City Folsom State CA Zip Code 95630-4716	Purpose of Disbursement Telephone 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)	Category/Type

Full Name (Last, First, Middle Initial) B. Aristotle		Date of Disbursement MM / DD / YYYY 06 / 29 / 2015
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1725.00 Transaction ID : B8732DE17BA1148BAB9F
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software 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)	Category/Type

Full Name (Last, First, Middle Initial) c. Ameren Cilco		Date of Disbursement MM / DD / YYYY 06 / 29 / 2015
Mailing Address PO Box 66826		Amount of Each Disbursement this Period 47.45 Transaction ID : BCC6C7925B7844B58B9E
City Saint Louis State MO Zip Code 63166-6826	Purpose of Disbursement Utilities 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)	Category/Type

SUBTOTAL of Disbursements This Page (optional).....	1916.80
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 Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Karen C Haney		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2015
Mailing Address 5502 N Ramblewood Ct		Amount of Each Disbursement this Period 4968.37
City Peoria	State IL	
Zip Code 61615-3235	Purpose of Disbursement Salary	Transaction ID : BC73C5806157C4835869
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 10070.12
City Dallas	State TX	
Zip Code 75265-0448	Purpose of Disbursement See Memo Entries	Transaction ID : B971304BD26E24E33991
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. Starbucks		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 2401 Utah Ave S		Amount of Each Disbursement this Period 289.35
City Seattle	State WA	
Zip Code 98134-1436	Purpose of Disbursement Fundraising Event Catering	Transaction ID : B232D96FE0EE145DEA0E
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15038.49
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 Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 58	
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Zest American Bistro		Date of Disbursement MM / DD / YYYY 04 / 05 / 2015
Mailing Address 735 8th St SE		Amount of Each Disbursement this Period 117.81
City Washington	State DC	
Zip Code 20003-2802	Purpose of Disbursement Fundraising Meeting Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) B. Joe's Stone Crab		Date of Disbursement MM / DD / YYYY 04 / 05 / 2015
Mailing Address 11 Washington Ave		Amount of Each Disbursement this Period 848.92
City Miami Beach	State FL	
Zip Code 33139	Purpose of Disbursement Fundraising Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) c. Verizon Center		Date of Disbursement MM / DD / YYYY 04 / 05 / 2015
Mailing Address 601 F ST NW		Amount of Each Disbursement this Period 1230.79
City Washington	State DC	
Zip Code 20004-1605	Purpose of Disbursement Event Tickets	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Target		M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 5001 N Big Hollow Rd		Amount of Each Disbursement this Period
City Peoria State IL Zip Code 61615-3538		3.80
Purpose of Disbursement Office Supplies		Transaction ID : B77C06FAC8B4B4ED79A8
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USPS		M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 6310 N University St		Amount of Each Disbursement this Period
City Peoria State IL Zip Code 61614-3483		294.00
Purpose of Disbursement Postage		Transaction ID : B8EC257167FE741C2887
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Holiday Inn		M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 62526		Amount of Each Disbursement this Period
City Decatur State IL Zip Code 62526-0000		212.04
Purpose of Disbursement Lodging		Transaction ID : BB1E646B0CA744AD4A48
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 300 1st St SE			Amount of Each Disbursement this Period 163.31
City Washington	State DC	Zip Code 20003-1801	
Purpose of Disbursement Fundraising Event Catering		Candidate Name	Transaction ID : BD74E1527C29345CCAA4
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)		Category/ Type	[MEMO ITEM]
State:	District:		

Full Name (Last, First, Middle Initial) B. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address PO Box 619612			Amount of Each Disbursement this Period 412.60
City Dfw Airport	State TX	Zip Code 75261-9612	
Purpose of Disbursement Fundraising Airfare		Candidate Name	Transaction ID : B956E1C9211444389BB2
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)		Category/ Type	[MEMO ITEM]
State:	District:		

Full Name (Last, First, Middle Initial) c. US Airways			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 4000 E Sky Harbor Blvd			Amount of Each Disbursement this Period 25.00
City Phoenix	State AZ	Zip Code 85034-3802	
Purpose of Disbursement Travel Expense		Candidate Name	Transaction ID : BC05043E8DE0E4B08B7F
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)		Category/ Type	[MEMO ITEM]
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Firehook		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 912 17th St NW		Amount of Each Disbursement this Period 200.04
City Washington	State DC	
Zip Code 20006-2502	Purpose of Disbursement Fundraising Event Catering	Transaction ID : B5C791DFEBCE84AB9AC7
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. BP Oil		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 950 Corporate Office Dr		Amount of Each Disbursement this Period 41.92
City Milford	State MI	
Zip Code 48381-5003	Purpose of Disbursement Travel Expense	Transaction ID : BEA0D29548CA747D8AC6
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Shell		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 3300 E Clear Lake Ave		Amount of Each Disbursement this Period 105.07
City Springfield	State IL	
Zip Code 62702-6209	Purpose of Disbursement Travel Expense	Transaction ID : BCB5E23C8FAC94C98B88
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Rasika		Date of Disbursement MM / DD / YYYY 04 / 05 / 2015
Mailing Address 633 D St NW		Amount of Each Disbursement this Period 83.80
City Washington	State DC	
Zip Code 20004-2904	Purpose of Disbursement Fundraising Meeting Expense	Transaction ID : BDF19BFC5E70C4A47AC7
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Circle K		Date of Disbursement MM / DD / YYYY 04 / 05 / 2015
Mailing Address 319 N Main St		Amount of Each Disbursement this Period 93.51
City Morton	State IL	
Zip Code 61550-2027	Purpose of Disbursement Travel Expense	Transaction ID : B686C4B7BD4C94A74A8E
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Capital Grille		Date of Disbursement MM / DD / YYYY 04 / 05 / 2015
Mailing Address 601 Pennsylvania Ave NW		Amount of Each Disbursement this Period 322.60
City Washington	State DC	
Zip Code 20004-2601	Purpose of Disbursement Fundraising Meeting Expense	Transaction ID : B195277AEDF4D45FC985
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 1200 E Algonquin Rd		Amount of Each Disbursement this Period 2060.07
City State Zip Code Elk Grove Village IL 60007-0000	Purpose of Disbursement Fundraising Airfare	
Candidate Name	Category/Type	Transaction ID : BF75AAD0B608B411D841
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:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Enterprise Car Rental		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 1120 W Pioneer Pkwy		Amount of Each Disbursement this Period 1387.28
City State Zip Code Peoria IL 61615-1917	Purpose of Disbursement Car Rental	
Candidate Name	Category/Type	Transaction ID : B9285C4091DBF4068BE0
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:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Verizon		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2015
Mailing Address 255 Parkshore Dr		Amount of Each Disbursement this Period 304.91
City State Zip Code Folsom CA 95630-4716	Purpose of Disbursement Telephone	
Candidate Name	Category/Type	Transaction ID : B29D8AF9401A545EC866
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:		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement MM / DD / YYYY 04 / 05 / 2015
Mailing Address 801 W Lake Ave		Amount of Each Disbursement this Period 152.77
City Peoria	State IL	
Zip Code 61614-5951	Purpose of Disbursement Office Supplies	Transaction ID : BEB737357323B44BEAEA
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Apollomart		Date of Disbursement MM / DD / YYYY 04 / 05 / 2015
Mailing Address 502 Hoselton Dr		Amount of Each Disbursement this Period 55.60
City Chenoa	State IL	
Zip Code 61726-8718	Purpose of Disbursement Travel Expense	Transaction ID : B04A4D72FDE124AE4926
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Nora		Date of Disbursement MM / DD / YYYY 04 / 05 / 2015
Mailing Address 2132 Florida Ave NW		Amount of Each Disbursement this Period 347.70
City Washington	State DC	
Zip Code 20008-1925	Purpose of Disbursement Fundraising Meeting Expense	Transaction ID : B24CF566DEB5E46F8B01
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Karen C Haney			Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015		
Mailing Address 5502 N Ramblewood Ct			Amount of Each Disbursement this Period 99.94		
City Peoria	State IL	Zip Code 61615-3235	Transaction ID : B22D3E6FD537A4DBF84D		
Purpose of Disbursement See Memo Entry		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:					

Full Name (Last, First, Middle Initial) B. Verizon			Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2015		
Mailing Address 255 Parkshore Dr			Amount of Each Disbursement this Period 99.94		
City Folsom	State CA	Zip Code 95630-4716	Transaction ID : B059E8FB78E7044B0BC0		
Purpose of Disbursement Telephone		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:					

Full Name (Last, First, Middle Initial) c. Karen C Haney			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015		
Mailing Address 5502 N Ramblewood Ct			Amount of Each Disbursement this Period 103.39		
City Peoria	State IL	Zip Code 61615-3235	Transaction ID : BF56B49FF5BB54B5181C		
Purpose of Disbursement See Memo Entry		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:					

SUBTOTAL of Disbursements This Page (optional).....	203.33
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 Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 255 Parkshore Dr		Amount of Each Disbursement this Period 103.39
City Folsom State CA Zip Code 95630-4716	Purpose of Disbursement Telephone	
Candidate Name	Category/Type	Transaction ID : B7955D1BC35A74C7AA1E
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:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 1659.70
City Dallas State TX Zip Code 75265-0448	Purpose of Disbursement See Memo Entry	
Candidate Name	Category/Type	Transaction ID : B37FE829C275D47C184A
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:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 1659.70
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Fundraising Event Catering	
Candidate Name	Category/Type	Transaction ID : BA3138DC6BFC143B08D7
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:		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	1659.70
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 Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 58	
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Karen C Haney		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 5502 N Ramblewood Ct		Amount of Each Disbursement this Period 121.98 Transaction ID : B0DFAD29D6ABA4B8C91B
City Peoria State IL Zip Code 61615-3235	Purpose of Disbursement See Memo Entry	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 255 Parkshore Dr		Amount of Each Disbursement this Period 121.98 Transaction ID : B18C79DEA4B9E45FEBBF [MEMO ITEM]
City Folsom State CA Zip Code 95630-4716	Purpose of Disbursement Telephone	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 4026.81 Transaction ID : BA826214FAE504625875
City Dallas State TX Zip Code 75265-0448	Purpose of Disbursement See Memo Entries	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4148.79
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 Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Enterprise Car Rental		Date of Disbursement MM / DD / YYYY 06 / 16 / 2015
Mailing Address 1120 W Pioneer Pkwy		Amount of Each Disbursement this Period 271.02
City Peoria	State IL	
Zip Code 61615-1917		[MEMO ITEM]
Purpose of Disbursement Travel Expense	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:		

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Date of Disbursement MM / DD / YYYY 06 / 16 / 2015
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 338.00
City Dallas	State TX	
Zip Code 75235-1908		[MEMO ITEM]
Purpose of Disbursement Travel Expense	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:		

Full Name (Last, First, Middle Initial) c. Hotel Tonight		Date of Disbursement MM / DD / YYYY 06 / 16 / 2015
Mailing Address 901 Market St #310		Amount of Each Disbursement this Period 345.00
City San Francisco	State CA	
Zip Code 94103-1752		[MEMO ITEM]
Purpose of Disbursement Travel Expense	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:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 58	
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 182 Howard St, Ste 8		Amount of Each Disbursement this Period 490.02 Transaction ID : BD5DED2BEBA7E4E4A86A
City San Francisco	State CA Zip Code 94105-1611	
Purpose of Disbursement Travel Expense	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address 1200 E Algonquin Rd		Amount of Each Disbursement this Period 2426.82 Transaction ID : BF9509B436921461B8B5
City Elk Grove Village	State IL Zip Code 60007-0000	
Purpose of Disbursement Travel Expense	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 5734.81 Transaction ID : B4DCE374EBB614D60833
City Dallas	State TX Zip Code 75265-0448	
Purpose of Disbursement See Memo Entries	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	5734.81
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 Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Verizon		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 255 Parkshore Dr		Amount of Each Disbursement this Period 1045.40
City Folsom	State CA	
Zip Code 95630-4716		Transaction ID : BC6264D3794BA48AA970
Purpose of Disbursement Telephone	Category/Type	
Candidate Name		[MEMO ITEM]
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:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 801 W Lake Ave		Amount of Each Disbursement this Period 46.08
City Peoria	State IL	
Zip Code 61614-5951		Transaction ID : B0CB643B9A05645B9854
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		[MEMO ITEM]
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:		

Full Name (Last, First, Middle Initial) C. Joe's Seafood Prime Steak and Stone Crab		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 750 15th St NW		Amount of Each Disbursement this Period 1645.81
City Washington	State DC	
Zip Code 20005-1018		Transaction ID : B6967CD1840E74948845
Purpose of Disbursement Fundraising Event Catering	Category/Type	
Candidate Name		[MEMO ITEM]
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:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 58			
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Uber Technologies, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 182 Howard St, Ste 8		Amount of Each Disbursement this Period 797.44
City San Francisco	State CA Zip Code 94105-1611	
Purpose of Disbursement Fundraising Travel Expense		Transaction ID : BAB19C4EE08944D688E8
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 1200 E Algonquin Rd		Amount of Each Disbursement this Period 680.00
City Elk Grove Village	State IL Zip Code 60007-0000	
Purpose of Disbursement Fundraising Airfare		Transaction ID : BD16ECC983283410794F
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)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jim's Downtown Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2015
Mailing Address 110 SW Jefferson Ave		Amount of Each Disbursement this Period 791.25
City Peoria	State IL Zip Code 61602-1253	
Purpose of Disbursement Event Catering		Transaction ID : B90D3F94E16CF42958B3
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)	[MEMO ITEM]
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 58	
	<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)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Fiola		Date of Disbursement MM / DD / YYYY 05 / 11 / 2015
Mailing Address 601 Pennsylvania Ave NW Ste 125N		Amount of Each Disbursement this Period 711.80
City Washington	State DC	
Zip Code 20004-3644	Purpose of Disbursement Fundraising Meeting Expense	Transaction ID : BC3C88D3CB6DE4C6DBA6
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
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:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	1141317.70

**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 48 OF 58			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Marilyn J Thoma		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 180 E Pearson St Apt 6105		Amount of Each Disbursement this Period 2300.00 Transaction ID : B0C60A32A794341848B7
City Chicago State IL Zip Code 60611-2190	Purpose of Disbursement Refund: Refund of Contribution	
Candidate Name	Category/Type	
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. Mr. Ronald J Gidwitz		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 200 S Wacker Dr Ste 4000		Amount of Each Disbursement this Period 2500.00 Transaction ID : B17B05F7D1EDA433B941
City Chicago State IL Zip Code 60606-5821	Purpose of Disbursement Refund: Refund of Contribution	
Candidate Name	Category/Type	
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) c. Brian Dror		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 5967 W 3rd St Ste 102		Amount of Each Disbursement this Period 2600.00 Transaction ID : B463FEE643DC34194ABC
City Los Angeles State CA Zip Code 90036-2835	Purpose of Disbursement Refund: Refund of Contribution	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	7400.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 58			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Mr. Craig J. Duchossois		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 845 N Larch Ave		Amount of Each Disbursement this Period 2700.00 Transaction ID : B759A80B9F49A46A5AFA
City Elmhurst	State IL	
Zip Code 60126-1114	Purpose of Disbursement Refund: Refund of Contribution	Category/ Type
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)	State: District:	

Full Name (Last, First, Middle Initial) B. Howard Sharfman		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2015
Mailing Address 500 W Madison		Amount of Each Disbursement this Period 2000.00 Transaction ID : B552AFF49DD6E4137A0F
City Chicago	State IL	
Zip Code 60661-4544	Purpose of Disbursement Refund: Refund	Category/ Type
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)	State: District:	

Full Name (Last, First, Middle Initial) c. Mr. Samuel Zell		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 2 N Riverside Plz Ste 600		Amount of Each Disbursement this Period 2500.00 Transaction ID : BFD002B6F5A184061B9C
City Chicago	State IL	
Zip Code 60606-2627	Purpose of Disbursement Refund: Refund of Contribution	Category/ Type
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)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7200.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 58			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Mr. Barry L MacLean		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1000 Allanson Rd		Amount of Each Disbursement this Period 2700.00 Transaction ID : B3B6DEBCF188B48438F5
City Mundelein	State IL	
Zip Code 60060-3804	Purpose of Disbursement Refund: Refund of Contribution	Category/ Type
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)	State: District:	

Full Name (Last, First, Middle Initial) B. Ms. Kristen H. Hertel		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 419 Sheridan Rd		Amount of Each Disbursement this Period 2500.00 Transaction ID : BBEC1800BBDD64160B63
City Winnetka	State IL	
Zip Code 60093-2626	Purpose of Disbursement Refund: Refund of Contribution	Category/ Type
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)	State: District:	

Full Name (Last, First, Middle Initial) c. Joyce T Green		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 9200 Point Cypress Dr		Amount of Each Disbursement this Period 2700.00 Transaction ID : BA0C517C7B9D24A10927
City Orlando	State FL	
Zip Code 32836-5479	Purpose of Disbursement Refund: Refund of Contribution	Category/ Type
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)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7900.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 58			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Mr. Richard W. Porter		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 875 Bryant Ave		Amount of Each Disbursement this Period 2300.00 Transaction ID : B9A4414A818654B258A1
City Winnetka	State IL	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type
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)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. David MacNeil		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1 MacNeil Ct		Amount of Each Disbursement this Period 2700.00 Transaction ID : B559B0FFEBB2B4499AB1
City Bolingbrook	State IL	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type
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)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Mr. Richard Melman		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 5419 N Sheridan Rd		Amount of Each Disbursement this Period 300.00 Transaction ID : B9C7F1DB58173453F9EA
City Chicago	State IL	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type
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)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	5300.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 58	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Mr. Craig J. Duchossois		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 845 N Larch Ave		Amount of Each Disbursement this Period 2700.00 Transaction ID : BFB9D5DC6966447498CF
City Elmhurst	State IL	
Zip Code 60126-1114	Purpose of Disbursement Refund: Refund of Contribution	Category/ Type
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)	State: District:	

Full Name (Last, First, Middle Initial) B. Mr. Muneer A. Satter		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 71 S Wacker Dr Ste 500		Amount of Each Disbursement this Period 2500.00 Transaction ID : B6CFEE47FFEC7414BB66
City Chicago	State IL	
Zip Code 60606-4673	Purpose of Disbursement Refund: Refund of Contribution	Category/ Type
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)	State: District:	

Full Name (Last, First, Middle Initial) C. Mr. William C. Kunkler		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1500 N Lake Shore Dr Ste 23A		Amount of Each Disbursement this Period 2700.00 Transaction ID : B00DC579777FA41919B2
City Chicago	State IL	
Zip Code 60610-6686	Purpose of Disbursement Refund: Refund of Contribution	Category/ Type
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)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7900.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 58			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Richard Driehaus		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 25 E Erie St		Amount of Each Disbursement this Period 2700.00 Transaction ID : BA789741CC2194B0BA04
City Chicago	State IL Zip Code 60611-2735	
Purpose of Disbursement Refund: Refund of Contribution		Category/Type
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)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. William C. Kunkler		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address 1500 N Lake Shore Dr Ste 23A		Amount of Each Disbursement this Period 2700.00 Transaction ID : BB8446D48C469458EB07
City Chicago	State IL Zip Code 60610-6686	
Purpose of Disbursement Refund: Refund of Contribution		Category/Type
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)	
State: District:		

Full Name (Last, First, Middle Initial) c. David MacNeil		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1 MacNeil Ct		Amount of Each Disbursement this Period 2700.00 Transaction ID : B9F8397A7716040178AD
City Bolingbrook	State IL Zip Code 60440-4903	
Purpose of Disbursement Refund: Refund of Contribution		Category/Type
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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8100.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 58			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Mrs. Janet Duchossois		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 209 E Lake Shore Dr #15E		Amount of Each Disbursement this Period 2300.00 Transaction ID : BEC6E55F3915442F5A24
City Chicago	State IL Zip Code 60611-1307	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type
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)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mrs. Janet Duchossois		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 209 E Lake Shore Dr #15E		Amount of Each Disbursement this Period 2700.00 Transaction ID : B51DA43EBCEC846EBB73
City Chicago	State IL Zip Code 60611-1307	
Purpose of Disbursement Refund: Refund of Contribution		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) c. Carl D Thoma		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 180 E Pearson St Apt 6105		Amount of Each Disbursement this Period 2700.00 Transaction ID : B1E5E5A2A8B4843FBA14
City Chicago	State IL Zip Code 60611-2190	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type
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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7700.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 58			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Michael Derick		Date of Disbursement MM / DD / YYYY 04 / 09 / 2015
Mailing Address 1660 Balmoral Cir		Amount of Each Disbursement this Period 2300.00
City Inverness	State IL Zip Code 60067-4719	
Purpose of Disbursement Refund: Refund of Contribution		Transaction ID : BE33A4FD055E84FAC87A
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)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
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:		

SUBTOTAL of Disbursements This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	53800.00

**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 56 OF 58	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Schock for Congress

Full Name (Last, First, Middle Initial) A. Swedish Match North America PAC		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1021 E Cary St Ste 1600		Amount of Each Disbursement this Period 1000.00 Transaction ID : B1205C05635154C7F9C0
City Richmond State VA Zip Code 23219-4000	Purpose of Disbursement Refund: Refund of Contribution	
Candidate Name Swedish Match North America PAC	Category/Type	
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. Investment Company Institute PAC (ICI PAC)		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1401 H St NW Ste 1200		Amount of Each Disbursement this Period 2500.00 Transaction ID : B37A34213CF9847C9A34
City Washington State DC Zip Code 20005-2110	Purpose of Disbursement Refund: Refund of Contribution	
Candidate Name Investment Company Institute PAC (ICI PAC)	Category/Type	
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) c. Investment Company Institute PAC (ICI PAC)		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 1401 H St NW Ste 1200		Amount of Each Disbursement this Period 2000.00 Transaction ID : B5EAFF898FE714816856
City Washington State DC Zip Code 20005-2110	Purpose of Disbursement Refund: Refund of Contribution	
Candidate Name Investment Company Institute PAC (ICI PAC)	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	5500.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 58	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Schock for Congress

Full Name (Last, First, Middle Initial) A. General Cigar PAC		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 10900 Nuckols Rd Ste 100		Amount of Each Disbursement this Period 500.00
City Glen Allen	State VA	
Zip Code 23060-9277	Purpose of Disbursement Refund: Refund of Contribution	Transaction ID : B9324A077C4214BEFB92
Candidate Name General Cigar PAC	Category/ Type	
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	6000.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Schock for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jones Day	Nature of Debt (Purpose): Legal Fees
Mailing Address 51 Louisiana Ave NW	
City State Zip Code Washington DC 20001-2105	

Outstanding Balance Beginning This Period 313919.95	Transaction ID : DDCC9AB93B82F4CFC92C	
Amount Incurred This Period 433065.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 746985.45

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

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

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

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

1) SUBTOTALS This Period This Page (optional)	746985.45
2) TOTALS This Period (last page this line number only)	746985.45
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	746985.45