

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

14 JAN 28 PM 2:33

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Americans for Doug Truax

ADDRESS (number and street)

PO Box 4808



Check if different than previously reported. (ACC)

Oak Brook

IL

60522

2. FEC IDENTIFICATION NUMBER

C00546457

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

IL

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 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 Y Y

in the State of

5. Covering Period

M M 10

D D 01

Y Y Y Y Y Y 2013

through

M M 12

D D 31

Y Y Y Y Y Y 2013

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 Sherry Gaskill

Signature of Treasurer Sherry Gaskill

Date

M M 01

D D 23

Y Y Y Y Y Y 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

14020020227

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 87

Write or Type Committee Name

Americans for Doug Truax

Report Covering the Period: From:

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

To:

M M / D D / Y Y Y Y
12 / 31 / 2013

	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))	106680.67	219338.26
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	106680.67	219338.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	93685.44	195189.01
(b) Total Offsets to Operating Expenditures (from Line 14)	87.70	87.70
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	93597.74	195101.31
8. Cash on Hand at Close of Reporting Period (from Line 27)	44236.95	
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)	24380.28	

For further information contact:

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

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

14020020228

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 87

Write or Type Committee Name
Americans for Doug Truax

Report Covering the Period: From:

M	M
10	

 /

D	D
01	

 /

Y	L	Y	Y	Y	Y
		20	13		

 To:

M	M
12	

 /

D	D
31	

 /

Y	L	Y	Y	Y	Y
		20	13		

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).....	89835.00	181035.00
(ii) Unitemized.....	16810.67	26299.91
(iii) TOTAL of contributions from individuals.....	106645.67	207334.91
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) The Candidate.....	35.00	11003.35
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	106680.67	219338.26
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	18000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	18000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	87.70	87.70
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	2000.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	106768.37	239425.96

14020020229

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	93685.44	195189.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	93685.44	195189.01

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	31154.02
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	106768.37
25. SUBTOTAL (add Line 23 and Line 24).....	137922.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	93685.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	44236.95

14020020230

**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 87
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
KENNETH H. BEARD

Mailing Address **3711 MADISON ST**

City **OAK BROOK** State **IL** Zip Code **60523-2757**

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

Name of Employer **KHB GROUP** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1550.00**

Date of Receipt **10 / 31 / 2013**
Transaction ID : **SA11.307**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KENNETH H. BEARD

Mailing Address **3711 MADISON ST**

City **OAK BROOK** State **IL** Zip Code **60523-2757**

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

Name of Employer **KHB GROUP** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1550.00**

Date of Receipt **11 / 26 / 2013**
Transaction ID : **SA11.451**

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

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

Mailing Address **1919 N. DAYTON ST.**

City **CHICAGO** State **IL** Zip Code **60614-5028**

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

Name of Employer **CTCA** Occupation **EXECUTIVE CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **10 / 21 / 2013**
Transaction ID : **SA11.299**

Amount of Each Receipt this Period
5200.00
CONTRIBUTION

SEE REATTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **6750.00**

TOTAL This Period (last page this line number only)..... **6750.00**

14020020231

**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 87
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
LISA BONNER

Mailing Address **1919 N. DAYTON**

City **CHICAGO** State **IL** Zip Code **60614-5028**

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

Name of Employer **SELF EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : **SA11.662**

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

[MEMO ITEM]
 REATTRIBUTION / REDESIGNATION REQUESTED
 (AUTOMATIC) REATTRIBUTION FROM SPOUSE

B. Full Name (Last, First, Middle Initial)
STEPHEN BONNER

Mailing Address **1919 N. DAYTON ST.**

City **CHICAGO** State **IL** Zip Code **60614-5028**

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

Name of Employer **CTCA** Occupation **EXECUTIVE CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : **SA11.299B**

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

[MEMO ITEM]
 REATTRIBUTION TO SPOUSE

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

Mailing Address **144 E. 6TH ST**

City **HINSDALE** State **IL** Zip Code **60521-4650**

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

Name of Employer **MID-AMERICA DEVELOPMENT PROPERTIES** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2013

Transaction ID : **SA11.471**

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

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

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

1500.00

1500.00

14020020232

**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 7 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
JAMES P. BRUNER

Mailing Address 202 CAROBETH DRIVE

City: JACKSONVILLE State: IL Zip Code: 62650-2699

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

Name of Employer: UNITED CONTRACTORS MIDWEST Occupation: PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 11 / 19 / 2013

Transaction ID : SA11.413

Amount of Each Receipt this Period: 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM CAHILL

Mailing Address 280 SOUTH ST

City: ELMHURST State: IL Zip Code: 60126-4024

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

Name of Employer: BROWN & BROWN Occupation: INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 30 / 2013

Transaction ID : SA11.619

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

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

Mailing Address 631 CAROLYN DRIVE

City: GLEN ELLYN State: IL Zip Code: 60137-3901

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

Name of Employer: CAPX PARTNERS Occupation: FINANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 31 / 2013

Transaction ID : SA11.326

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

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

3750.00

14020020233

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
JANICE CHRISTENSEN

Mailing Address **5641 WALNUT AVE**

City **DOWNERS GROVE** State **IL** Zip Code **60516-1003**

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

Name of Employer **JP MORGAN CHASE** Occupation **IT MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **510.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : **SA11.664**

Amount of Each Receipt this Period
10.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DONALD CLARK

Mailing Address **12 TARTAN LAKES CIRCLE**

City **WESTMONT** State **IL** Zip Code **60559-6158**

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

Name of Employer **MICRON INDUSTRIES** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 07 / 2013

Transaction ID : **SA11.380**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

Mailing Address **12 TARTAN LAKES CIRCLE**

City **WESTMONT** State **IL** Zip Code **60559-6158**

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

Name of Employer **MICRON INDUSTRIES** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : **SA11.625**

Amount of Each Receipt this Period
300.00
 CONTRIBUTION

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

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

560.00

14020020234

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

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

FOR LINE NUMBER: PAGE 9 OF 87
(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)
RYAN COLVIN

A. Mailing Address **629 FEATHERSTONE DR.**

City WESTFIELD	State IN	Zip Code 46074-5869
FEC ID number of contributing federal political committee. C		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2013
Name of Employer GIBSON	Occupation SALES	Transaction ID : SA11.525
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	Amount of Each Receipt this Period 1000.00 CONTRIBUTION

Full Name (Last, First, Middle Initial)
MICHAEL CROSSETT

B. Mailing Address **1324 CALCUTTA LANE**

City NAPERVILLE	State IL	Zip Code 60563-2213
FEC ID number of contributing federal political committee. C		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2013
Name of Employer THE FEDERAL SAVINGS BANK	Occupation Executive Vice President	Transaction ID : SA11.426
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	Amount of Each Receipt this Period 250.00 CONTRIBUTION

Full Name (Last, First, Middle Initial)
PHIL DALEN

C. Mailing Address **1256 CANDLEWOOD CT**

City DOWNERS GROVE	State IL	Zip Code 60515-1400
FEC ID number of contributing federal political committee. C		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2013
Name of Employer TUTHILL	Occupation IT MANAGER	Transaction ID : SA11.484
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	Amount of Each Receipt this Period 250.00 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

14020020235

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 87
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) MIKE DOMEK		Date of Receipt 10 / 01 / 2013
Mailing Address 265 EXCHANGE DR SUITE 201		Transaction ID : SA11.225
City CRYSTAL LAKE	State IL	Zip Code 60014-6230
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer DOMEK GROUP, INC.	Occupation PRESIDENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) MIKE DOMEK		Date of Receipt 10 / 11 / 2013
Mailing Address 265 EXCHANGE DR SUITE 201		Transaction ID : SA11.234
City CRYSTAL LAKE	State IL	Zip Code 60014-6230
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer DOMEK GROUP, INC.	Occupation PRESIDENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) TIM DUMA		Date of Receipt 12 / 30 / 2013
Mailing Address 419 YORK STREET		Transaction ID : SA11.572
City BOLINGBROOK	State IL	Zip Code 60440-1465
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00 CONTRIBUTION
Name of Employer SELF	Occupation PLANNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

14020020236

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

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

FOR LINE NUMBER: (check only one)	PAGE 11 OF 87
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) KATHLEEN FEIFAR		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013	
A. Mailing Address 656 THOMPSONS CIRCLE		Transaction ID : SA11.401	
City INVERNESS	State IL	Zip Code 60067-4662	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period CONTRIBUTION 250.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
Full Name (Last, First, Middle Initial) DAVID FIELD		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2013	
B. Mailing Address 2151 LILLIAN LANE		Transaction ID : SA11.295	
City LISLE	State IL	Zip Code 60532-1100	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period CONTRIBUTION 500.00	
Name of Employer BANK OF AMERICA/MERRILL LYNCH	Occupation PRIVATE WEALTH ADVISOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
Full Name (Last, First, Middle Initial) PATRICK FITZGERALD		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2013	
C. Mailing Address 16 CHARLESTON RD		Transaction ID : SA11.306	
City HINSDALE	State IL	Zip Code 60521-5003	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period CONTRIBUTION 50.00	
Name of Employer FITZGERALD MARKETING & COMMUNICATI	Occupation OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1550.00		
SUBTOTAL of Receipts This Page (optional).....		800.00	
TOTAL This Period (last page this line number only).....			

14020020237

**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 12 OF 87
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) PATRICK FITZGERALD		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2013
A. Mailing Address 16 CHARLESTON RD		Transaction ID : SA11.450
City HINSDALE	State IL	Zip Code 60521-5003
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1500.00 CONTRIBUTION
Name of Employer FITZGERALD MARKETING & COMMUNICAT	Occupation OWNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1550.00	

Full Name (Last, First, Middle Initial) JEROME FRITZ		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2013
B. Mailing Address 101 BROAD ST		Transaction ID : SA11.578
City LAKE GENEVA	State WI	Zip Code 53147-2000
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer CORNERSTONE NATIONAL BANK & TRUST	Occupation BANKER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) ROBERT GALGAN		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2013
C. Mailing Address 340 W BUTTERFIELD RD		Transaction ID : SA11.470
City ELMHURST	State IL	Zip Code 60126-5069
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00 CONTRIBUTION
Name of Employer LAW OFFICES OF GALANOPOULOS & GALG,	Occupation ATTORNEY	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

14020020238

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) LAURA GIRGIS			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2013		
A. Mailing Address 1315 BRITTANY WAY			Transaction ID : SA11.614		
City NAPERVILLE	State IL	Zip Code 60540-8387	Amount of Each Receipt this Period CONTRIBUTION 100.00		
FEC ID number of contributing federal political committee. C					
Name of Employer HOMEMAKER		Occupation HOMEMAKER			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00			

Full Name (Last, First, Middle Initial) LAURA GIRGIS			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2013		
B. Mailing Address 1315 BRITTANY WAY			Transaction ID : SA11.624		
City NAPERVILLE	State IL	Zip Code 60540-8387	Amount of Each Receipt this Period CONTRIBUTION 2600.00		
FEC ID number of contributing federal political committee. C					
Name of Employer HOMEMAKER		Occupation HOMEMAKER			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00			

Full Name (Last, First, Middle Initial) ROB GIRGIS			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2013		
C. Mailing Address 1315 BRITTANY AVE			Transaction ID : SA11.613		
City NAPERVILLE	State IL	Zip Code 60540-8387	Amount of Each Receipt this Period CONTRIBUTION 100.00		
FEC ID number of contributing federal political committee. C					
Name of Employer ROBERT F GIRGIS DDS LTD		Occupation ORTHODONTIST			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00			

SUBTOTAL of Receipts This Page (optional).....			2800.00		
TOTAL This Period (last page this line number only).....					

14020020239

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

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

FOR LINE NUMBER: PAGE 14 OF 87
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
ROB GIRGIS

Mailing Address **1315 BRITTANY AVE**

City **NAPERVILLE** State **IL** Zip Code **60540-8387**

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

Name of Employer **ROBERT F GIRGIS DDS LTD** Occupation **ORTHODONTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
12 / 30 / 2013

Transaction ID : **SA11.623**

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TAWFIK GIRGIS

Mailing Address **804 BURR RIDGE CLUB**

City **BURR RIDGE** State **IL** Zip Code **60527-5211**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
10 / 11 / 2013

Transaction ID : **SA11.229**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RONALD W. GOERS

Mailing Address **6700 RT 83**

City **DARIEN** State **IL** Zip Code **60561-3972**

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

Name of Employer **GOERS DENTAL CARE** Occupation **DENTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
12 / 30 / 2013

Transaction ID : **SA11.568**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

4100.00

14020020240

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

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

FOR LINE NUMBER: PAGE 15 OF 87
(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
KARYN GRANE

Mailing Address **610 LAKEWOOD COURT**

City **OAK BROOK** State **IL** Zip Code **60523-1519**

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

Name of Employer **HOUSEWIFE** Occupation **HOUSEWIFE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt
MM / DD / YYYY
11 / 14 / 2013

Transaction ID : **SA11.389**

Amount of Each Receipt this Period
2400.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAUL GRANE

Mailing Address **610 LAKEWOOD CT.**

City **OAK BROOK** State **IL** Zip Code **60523-1519**

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

Name of Employer **GRANE TRANSPORTATION** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
MM / DD / YYYY
11 / 14 / 2013

Transaction ID : **SA11.388**

Amount of Each Receipt this Period
1600.00
CONTRIBUTION

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

Mailing Address **5416 LAWN AVENUE**

City **WESTERN SPRINGS** State **IL** Zip Code **60558-1848**

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

Name of Employer **TYCO FIRE PROTECTION** Occupation **SR VICE PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
11 / 14 / 2013

Transaction ID : **SA11.390**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

4500.00
CONTRIBUTION

14020020241

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

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

FOR LINE NUMBER: PAGE 16 OF 87
(check only one)
 11a 12 11b 13a 11c 13b 11d 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)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
GREGORY GUNDERSON

Mailing Address 7013 PENNER AVE

City Downers Grove State IL Zip Code 60516-3196

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

Name of Employer Occupation
SELECT CHURCH INSURANCE SERVICES, INC. Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt: 12 / 09 / 2013
Transaction ID : SA11.468

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LAURA HANNAN

Mailing Address 905 N HIGHLAND AVENUE

City Arlington Heights State IL Zip Code 60004-5519

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

Name of Employer Occupation
UL LLC HR DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 750.00

Date of Receipt: 12 / 31 / 2013
Transaction ID : SA11.588

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 905 N HIGHLAND AVENUE

City Arlington Heights State IL Zip Code 60004-5519

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

Name of Employer Occupation
UL LLC HR DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 750.00

Date of Receipt: 12 / 31 / 2013
Transaction ID : SA11.589

Amount of Each Receipt this Period
250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 1500.00

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

14020020242

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)
A. LAURA HANNAN

Mailing Address **905 N HIGHLAND AVENUE**

City State Zip Code
ARLINGTON HEIGHTS IL 60004-5519

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

Name of Employer Occupation
UL LLC HR DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
750.00

Date of Receipt

12 / 31 / 2013

Transaction ID : **SA11.590**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DOUG HANSEN

Mailing Address **3016 RIDGE ROAD**

City State Zip Code
NORTH HAVEN CT 06473-1021

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

Name of Employer Occupation
W I CLARK MANAGER

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
300.00

Date of Receipt

11 / 11 / 2013

Transaction ID : **SA11.376**

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

Mailing Address **3016 RIDGE ROAD**

City State Zip Code
NORTH HAVEN CT 06473-1021

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

Name of Employer Occupation
W I CLARK MANAGER

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
300.00

Date of Receipt

12 / 31 / 2013

Transaction ID : **SA11.593**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

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

550.00

14020020243

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

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

FOR LINE NUMBER: PAGE 18 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)
JERRY HAYDEN

Mailing Address **10306 E. CALLE DE LAS BRISAS**

City State Zip Code
SCOTTSDALE AZ 85255-3762

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

12 / 31 / 2013

Transaction ID : **SA11.658**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
JOHN HEAD

Mailing Address **3757 E DONALD DR**

City State Zip Code
PHOENIX AZ 85050-7369

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

Name of Employer Occupation
HONEYWELL BUSINESS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

12 / 11 / 2013

Transaction ID : **SA11.479**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
MICHAEL HOFFMAN

Mailing Address **3500 PROVENCE COURT**

City State Zip Code
SAINT CHARLES IL 60175-1091

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

Name of Employer Occupation
ELMHURST CLINIC DOCTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

10 / 18 / 2013

Transaction ID : **SA11.244**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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

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

3000.00

14020020244

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) WILLIAM HUPP		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2013
Mailing Address 405 DAWN AVE.		Transaction ID : SA11.445
City GLEN ELLYN	State IL	Zip Code 60137-4331
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00	
Name of Employer SELF EMPLOYED	Occupation ACCOUNTANT	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) JULIE JACOBS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2013
Mailing Address 542 ASHLAND AVE		Transaction ID : SA11.252
City RIVER FOREST	State IL	Zip Code 60305-1825
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer LEARNING RESOURCES	Occupation MANAGER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) LESTER JACOBS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2013
Mailing Address 141 SUNSET OAKS DRIVE		Transaction ID : SA11.522
City CORNELIA	State GA	Zip Code 30531-5672
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer THE C12 GROUP, LLC	Occupation CHAIRMAN	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	3350.00
TOTAL This Period (last page this line number only)	

14020020245

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

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

FOR LINE NUMBER: PAGE 20 OF 87
(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
THOMAS JACOBS

Mailing Address **542 ASHLAND AVE**

City **RIVER FOREST** State **IL** Zip Code **60305-1825**

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

Name of Employer **MEDHQ** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **10 / 28 / 2013**
Transaction ID : **SA11.251**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOSEPH JENSEN

Mailing Address **9351 S HARDING AVE
APT # 2**

City **EVERGREEN PARK** State **IL** Zip Code **60805-1846**

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

Name of Employer **SELF EMPLOYED** Occupation **OTR CARGO HAULER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **10 / 21 / 2013**
Transaction ID : **SA11.285**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

Mailing Address **9351 S HARDING AVE
APT # 2**

City **EVERGREEN PARK** State **IL** Zip Code **60805-1846**

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

Name of Employer **SELF EMPLOYED** Occupation **OTR CARGO HAULER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **12 / 03 / 2013**
Transaction ID : **SA11.508**

Amount of Each Receipt this Period
50.00
CONTRIBUTION

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

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

650.00

14020020246

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

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

FOR LINE NUMBER: PAGE 21 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)
JOSEPH JENSEN

Mailing Address **9351 S HARDING AVE
APT #2**

City State Zip Code
EVERGREEN PARK IL 60805-1846

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

Name of Employer Occupation
SELF EMPLOYED OTR CARGO HAULER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt

12 / 27 / 2013

Transaction ID : **SA11.544**

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
ROBERT KAPLAN

Mailing Address **6 ARLINGTON STREET
UNIT 4**

City State Zip Code
BOSTON MA 02116-3402

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

Name of Employer Occupation
HARVARD UNIVERSITY PROFESSOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt

12 / 13 / 2013

Transaction ID : **SA11.492**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
MAUREEN KAUFMAN

Mailing Address **6701 SWEETBRIAR LN**

City State Zip Code
DARIEN IL 60561-3675

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

Name of Employer Occupation
CUT ABOVE LANDSCAPING OFFICE MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

11 / 25 / 2013

Transaction ID : **SA11.434**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

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

2175.00

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

2175.00

14020020247

**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)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
MAUREEN KAUFMAN

Mailing Address **6701 SWEETBRIAR LN**

City **DARIEN** State **IL** Zip Code **60561-3675**

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

Name of Employer **CUT ABOVE LANDSCAPING** Occupation **OFFICE MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
M M / D D / Y Y Y Y
11 / 25 / 2013

Transaction ID : **SA11.435**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MAUREEN KAUFMAN

Mailing Address **6701 SWEETBRIAR LN**

City **DARIEN** State **IL** Zip Code **60561-3675**

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

Name of Employer **CUT ABOVE LANDSCAPING** Occupation **OFFICE MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
M M / D D / Y Y Y Y
11 / 25 / 2013

Transaction ID : **SA11.436**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EUGENE F. KEEFE

Mailing Address **118 N. CLINTON ST, #300**

City **CHICAGO** State **IL** Zip Code **60661-2334**

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

Name of Employer **KEEFE, CAMPBELL, BIERY, & ASSOC** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2013

Transaction ID : **SA11.621**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

1200.00

14020020248

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

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

FOR LINE NUMBER: PAGE 23 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) RUTH KNIPMEYER		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2013
A. Mailing Address 3111 HERITAGE OAKS LN		Transaction ID : SA11.312
City OAK BROOK	State IL	Zip Code 60523-2549
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00 CONTRIBUTION
Name of Employer NOT APPLICABLE	Occupation HOUSEWIFE	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) JACK KRAUS		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2013
B. Mailing Address 1270 NORTH AVE		Transaction ID : SA11.395
City WEST CHICAGO	State IL	Zip Code 60185-1087
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00 CONTRIBUTION
Name of Employer PTR TRUCK CENTER	Occupation OWNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) ANDY LAPPIN		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 18 / 2013
C. Mailing Address 630 LINCOLN AVE		Transaction ID : SA11.520
City GLENCOE	State IL	Zip Code 60022-1421
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer KENSINGTON RELIEF, LLC	Occupation REAL ESTATE MGT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	

14020020249

**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 24 OF 87	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
MARK LAROCCA

Mailing Address **137 W 200 S**

City **VALPARAISO** State **IN** Zip Code **46385-9607**

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

Name of Employer **JAMES O'BRIEN ASSOC** Occupation **SALES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **11 / 25 / 2013**

Transaction ID : **SA11.432**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BERNARD LEVITON

Mailing Address **1346 N. LASALLE**

City **CHICAGO** State **IL** Zip Code **60610-1911**

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

Name of Employer **SELF-EMPLOYED** Occupation **OWNER OF REAL ESTATE INVESTMENT CC**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **12 / 30 / 2013**

Transaction ID : **SA11.566**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address **645 N. WREN AVE**

City **PALATINE** State **IL** Zip Code **60067-3544**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **11 / 25 / 2013**

Transaction ID : **SA11.437**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

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

1600.00

14020020250

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

FOR LINE NUMBER: PAGE 25 OF 87
 (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
EDWARD LOUIS

Mailing Address **645 N. WREN AVE**

City **PALATINE** State **IL** Zip Code **60067-3544**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 28 / 2013

Transaction ID : SA11.547

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWARD LOUIS

Mailing Address **645 N. WREN AVE**

City **PALATINE** State **IL** Zip Code **60067-3544**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11.587

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

Mailing Address **6 N. MICHIGAN AVE
 UNIT 803**

City **CHICAGO** State **IL** Zip Code **60602-4885**

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

Name of Employer **HOUSEWIFE** Occupation **HOUSEWIFE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 26 / 2013

Transaction ID : SA11.448

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

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

2750.00

14020020251

**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 26 OF 87
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 11d
<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) TOM MALLON		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2013
Mailing Address 6 N. MICHIGAN AVE UNIT 803		Transaction ID : SA11.447
City CHICAGO	State Zip Code IL 60602-4885	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer REGENT SURGICAL HEALTH	Occupation CEO	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) LEONARD MANISCALCO		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2013
Mailing Address 3 FOREST GATE CIRCLE		Transaction ID : SA11.474
City OAK BROOK	State Zip Code IL 60523-2129	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF EMPLOYER	Occupation SELF EMPLOYED	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) PETER MCCABE		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2013
Mailing Address 907 S. ADAMS ST.		Transaction ID : SA11.330
City HINSDALE	State Zip Code IL 60521-4315	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer WINSTON & STRAWN	Occupation ATTORNEY	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	3350.00
TOTAL This Period (last page this line number only)	

14020020252

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

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

FOR LINE NUMBER: PAGE 27 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)
A. THOMAS J. MCCARTHY

Mailing Address 706 MCKINLEY LANE

City State Zip Code
HINSDALE IL 60521-4829

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

Name of Employer Occupation
MCCARTHY AND ASSOCIATES ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11.308

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. COLE MCCOMBS

Mailing Address 147 ABERDOUR LANE

City State Zip Code
INVERNESS IL 60067-8001

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11.303

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

Mailing Address 147 ABERDOUR LANE

City State Zip Code
INVERNESS IL 60067-8001

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11.302

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

5450.00

14020020253

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 87
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
MIKE MCCURRY

Mailing Address **259 WALKER AVE**

City **CLARENDON HILLS** State **IL** Zip Code **60514-1347**

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

Name of Employer **COLDWELL BANKER** Occupation **REAL ESTATE BROKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : **SA11.601**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MIKE MCCURRY

Mailing Address **259 WALKER AVE**

City **CLARENDON HILLS** State **IL** Zip Code **60514-1347**

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

Name of Employer **COLDWELL BANKER** Occupation **REAL ESTATE BROKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : **SA11.602**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

Mailing Address **1140 KEYSTONE AVE**

City **RIVER FOREST** State **IL** Zip Code **60305-**

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

Name of Employer **CONFIGURE ONE, INC.** Occupation **VP, PRODUCT DEVELOPMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 19 / 2013

Transaction ID : **SA11.521**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

700.00

14020020254

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

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

FOR LINE NUMBER: PAGE 29 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
RICHARD H. MCKAY

Mailing Address **1403 BURR RIDGE CLUB**

City **BURR RIDGE** State **IL** Zip Code **60527-5253**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2013

Transaction ID : **SA11.239**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PIERRE NAFFAH

Mailing Address **8582 HIGHCREST DRIVE**

City **DARIEN** State **IL** Zip Code **60561-1678**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2013

Transaction ID : **SA11.346**

Amount of Each Receipt this Period
300.00
 CONTRIBUTION

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

Mailing Address **P.O. BOX 10571**

City **PEORIA** State **IL** Zip Code **61612-0571**

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

Name of Employer **SELF** Occupation **TEACHER/SOCIAL WORKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2013

Transaction ID : **SA11.516**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

1050.00

14020020255

**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 30 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) LINDA NICHOLLS		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 1807 S WASHINGTON STE 110-395		Transaction ID : SA11.579
City NAPERVILLE	State IL	Zip Code 60565-2446
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00 CONTRIBUTION	
Name of Employer IMC SOLUTIONS, INC.	Occupation BUSINESS OWNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) MARY NOVAK-JANDREY		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 02 / 2013
Mailing Address 40434 N LAKESHORE DR		Transaction ID : SA11.456
City ANTIOCH	State IL	Zip Code 60002-8583
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer ARTHUR J GALLAGHER & CO.	Occupation CONSULTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) BRUCE PARADISE		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013
Mailing Address 0 N 440 PETER RD		Transaction ID : SA11.592
City WINFIELD	State IL	Zip Code 60190-
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00 CONTRIBUTION	
Name of Employer SELF EMPLOYED	Occupation CPA	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

14020020256

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

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

FOR LINE NUMBER: PAGE 31 OF 87
(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
DAVID PECKENPAUGH

Mailing Address **1937 COACH DRIVE**

City **NAPERVILLE** State **IL** Zip Code **60565-2435**

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

Name of Employer **WHITNELL** Occupation **SVP & CHIEF INVESTMENT OFFICER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2013

Transaction ID : **SA11.318**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HARRY PETERS

Mailing Address **808 WILDWOOD COURT**

City **OAK BROOK** State **IL** Zip Code **60523-1522**

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

Name of Employer **STRATEGIC SALES AND MARKETING** Occupation **CHAIRMAN, CEO & OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2013

Transaction ID : **SA11.475**

Amount of Each Receipt this Period
200.00

CONTRIBUTION

AMEX GIFT CARD

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

Mailing Address **808 WILDWOOD COURT**

City **OAK BROOK** State **IL** Zip Code **60523-1522**

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

Name of Employer **STRATEGIC SALES AND MARKETING** Occupation **CHAIRMAN, CEO & OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2013

Transaction ID : **SA11.476**

Amount of Each Receipt this Period
200.00

CONTRIBUTION

AMEX GIFT CARD

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

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

650.00

14020020257

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

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

FOR LINE NUMBER: PAGE 32 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) DOUG PORTER		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013
Mailing Address 4804 LAWN AVE		Transaction ID : SA11.310
City WESTERN SPRINGS	State IL	Zip Code 60558-1729
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00 CONTRIBUTION	
Name of Employer RMHC OF CHICAGOLAND & NORTHWEST IN	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1050.00	

Full Name (Last, First, Middle Initial) DOUG PORTER		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2013
Mailing Address 4804 LAWN AVE		Transaction ID : SA11.441
City WESTERN SPRINGS	State IL	Zip Code 60558-1729
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer RMHC OF CHICAGOLAND & NORTHWEST IN	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1050.00	

Full Name (Last, First, Middle Initial) STANLEY PRUSS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013
Mailing Address 61 WINDSOR DRIVE		Transaction ID : SA11.317
City OAK BROOK	State IL	Zip Code 60523-2346
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

14020020258

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

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

FOR LINE NUMBER: PAGE 33 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
STANLEY PRUSS

Mailing Address **61 WINDSOR DRIVE**

City **OAK BROOK** State **IL** Zip Code **60523-2346**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	27	2013

Transaction ID : **SA11.529**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GARY RABINE

Mailing Address **900 NATIONAL PARKWAY
SUITE 260**

City **SCHAUMBURG** State **IL** Zip Code **60173-5117**

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

Name of Employer **RABINE GROUP** Occupation **CHIEF EXECUTIVE OFFICER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	14	2013

Transaction ID : **SA11.393**

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

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

Mailing Address **321 SOUTH ELM STREET**

City **HINSDALE** State **IL** Zip Code **60521-4620**

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

Name of Employer **TRANZACT TECHNOLOGIES.** Occupation **CHIEF OF RELATIONSHIP DEVELOPMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	31	2013

Transaction ID : **SA11.580**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

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

Amount of Each Receipt this Period

2250.00

CONTRIBUTION

14020020259

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

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

FOR LINE NUMBER: PAGE 34 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)
ALBERT REYNOLDS

Mailing Address **1005 BURGA LOOP**

City State Zip Code
CHULA VISTA CA 91910-8071

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

Name of Employer Occupation
RETIRED CAPT. JAGC, USN (RET.)

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y
12 / 30 / 2013

Transaction ID : **SA11.571**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
CHRISTOPHER W. ROBERTS

Mailing Address **37W591 GREY BARN RD**

City State Zip Code
SAINT CHARLES IL 60175-6249

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

Name of Employer Occupation
INFO REQUESTED PER BEST EFFORTS INFO REQUESTED PER BEST EFFORTS

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y
12 / 03 / 2013

Transaction ID : **SA11.464**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
RAPHAEL ROCHE III

Mailing Address **3904 VENARD RD**

City State Zip Code
DOWNERS GROVE IL 60515-1912

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

Name of Employer Occupation
MERRILL LYNCH FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y
11 / 22 / 2013

Transaction ID : **SA11.420**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

750.00

14020020260

**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 35 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) GREGORY ROCQUE			Date of Receipt MM / DD / YYYY 10 / 31 / 2013	
A. Mailing Address 125 OAK RIDGE DR., E.			Transaction ID : SA11.316	
City BURR RIDGE	State IL	Zip Code 60527-6869	Amount of Each Receipt this Period 100.00 CONTRIBUTION	
FEC ID number of contributing federal political committee. C		Name of Employer FAIRINGTON		
Occupation EXECUTIVE		Election Cycle-to-Date 225.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

Full Name (Last, First, Middle Initial) GREGORY ROCQUE			Date of Receipt MM / DD / YYYY 11 / 14 / 2013	
B. Mailing Address 125 OAK RIDGE DR., E.			Transaction ID : SA11.391	
City BURR RIDGE	State IL	Zip Code 60527-6869	Amount of Each Receipt this Period 100.00 CONTRIBUTION	
FEC ID number of contributing federal political committee. C		Name of Employer FAIRINGTON		
Occupation EXECUTIVE		Election Cycle-to-Date 225.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

Full Name (Last, First, Middle Initial) ROBERT E. ROCQUE			Date of Receipt MM / DD / YYYY 10 / 25 / 2013	
C. Mailing Address 315 N LAGRANGE RD, APT 839			Transaction ID : SA11.253	
City LA GRANGE PARK	State IL	Zip Code 60526-5020	Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
FEC ID number of contributing federal political committee. C		Name of Employer RETIRED		
Occupation RETIRED		Election Cycle-to-Date 2600.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

SUBTOTAL of Receipts This Page (optional).....			2800.00	
TOTAL This Period (last page this line number only).....				

14020020261

**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 36 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) VIVIAN E. ROCQUE		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2013	
Mailing Address 315 N LAGRANGE RD, APT 839		Transaction ID : SA11.254	
City LA GRANGE PARK	State IL	Zip Code 60526-5020	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) JOHN ROPER		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2013	
Mailing Address 2612 MARIPOSA CIRCLE		Transaction ID : SA11.485	
City PLANO	State TX	Zip Code 75075-2605	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1200.00 CONTRIBUTION	
Name of Employer CBRE	Occupation COMMERCIAL REAL ESTATE BROKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1200.00		

Full Name (Last, First, Middle Initial) TODD C. SCHAEFER		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2013	
Mailing Address 2727 N. MARSHFIELD AVENUE		Transaction ID : SA11.327	
City CHICAGO	State IL	Zip Code 60614-1015	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 150.00 CONTRIBUTION	
Name of Employer JONES LANG LASALLE	Occupation SENIOR VICE PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	3950.00
TOTAL This Period (last page this line number only).....	3950.00

14020020262

**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 37 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) TODD C. SCHAEFER		Date of Receipt MM/DD/YYYY 11/25/2013
Mailing Address 2727 N. MARSHFIELD AVENUE		Transaction ID : SA11.431
City CHICAGO	State IL	Zip Code 60614-1015
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00 CONTRIBUTION	
Name of Employer JONES LANG LASALLE	Occupation SENIOR VICE PRESIDENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) MATTHEW SCHWERIN		Date of Receipt MM/DD/YYYY 12/03/2013
Mailing Address 1067 WIGTOWN CT		Transaction ID : SA11.465
City WHEATON	State IL	Zip Code 60189-7633
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer CAPS FINANCIAL GROUP	Occupation PORTFOLIO MANAGER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) JEFF SEILER		Date of Receipt MM/DD/YYYY 12/16/2013
Mailing Address 219 DARIEN LANE		Transaction ID : SA11.517
City SLEEPY HOLLOW	State IL	Zip Code 60118-1862
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer ELAP	Occupation MARKETING	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

14020020263

**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 38 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
DORA SILVIA

Mailing Address **943 CREEKSIDE CIR**

City **NAPERVILLE** State **IL** Zip Code **60563-2417**

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

Name of Employer **VERITAS** Occupation **MARKETING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : **SA11.582**

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARBARA A. SINGER

Mailing Address **1171 LEXINGTON LN**

City **BATAVIA** State **IL** Zip Code **60510-3358**

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

Name of Employer **CARENET PREGNANCY SERVICES** Occupation **EXECUTIVE DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 07 / 2013

Transaction ID : **SA11.232**

Amount of Each Receipt this Period
300.00
 CONTRIBUTION

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

Mailing Address **34620 CLAYTON RD**

City **DADE CITY** State **FL** Zip Code **33523-6274**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2013

Transaction ID : **SA11.486**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

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

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

700.00
 CONTRIBUTION

14020020264

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

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

FOR LINE NUMBER: PAGE 39 OF 87
(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
PHYLLIS STEINDL

Mailing Address **13 CARRIAGE COURT**

City **OAK BROOK** State **IL** Zip Code **60523-2616**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt **12 / 30 / 2013**
Transaction ID : **SA11.615**

Amount of Each Receipt this Period
600.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROGER STODDARD

Mailing Address **3157 SHELBURNE DR**

City **ROCKFORD** State **IL** Zip Code **61109-2861**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **11 / 25 / 2013**
Transaction ID : **SA11.444**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

Mailing Address **3157 SHELBURNE DR**

City **ROCKFORD** State **IL** Zip Code **61109-2861**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **12 / 27 / 2013**
Transaction ID : **SA11.536**

Amount of Each Receipt this Period
100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **800.00**

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

14020020265

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

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

FOR LINE NUMBER: PAGE 40 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)
ROGER STODDARD

A. Mailing Address **3157 SHELBURNE DR**

City State Zip Code
ROCKFORD IL 61109-2861

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

MM / DD / YYYY
12 / 31 / 2013

Transaction ID : SA11.647

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANNIE SULLIVAN

Mailing Address **4711 HIGHLAND AVE.**

City State Zip Code
DOWNERS GROVE IL 60515-3618

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF

Occupation
VO ACTOR AND CHOCOLATIER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt

MM / DD / YYYY
12 / 27 / 2013

Transaction ID : SA11.534

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

Mailing Address **4711 HIGHLAND AVE.**

City State Zip Code
DOWNERS GROVE IL 60515-3618

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF

Occupation
VO ACTOR AND CHOCOLATIER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt

MM / DD / YYYY
12 / 27 / 2013

Transaction ID : SA11.535

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

600.00

14020020266

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

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

FOR LINE NUMBER: PAGE 41 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
ANNIE SULLIVAN

Mailing Address **4711 HIGHLAND AVE.**

City **DOWNERS GROVE** State **IL** Zip Code **60515-3618**

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

Name of Employer **SELF** Occupation **VO ACTOR AND CHOCOLATIER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : **SA11.539**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM W. THORSNESS

Mailing Address **1900 SPRING ROAD SUITE 200**

City **OAK BROOK** State **IL** Zip Code **60523-1479**

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

Name of Employer **LILLIG & THORSNESS, LTD.** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2013

Transaction ID : **SA11.449**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN H. TOURNET

Mailing Address **1406 LONGLEAF CT**

City **MATTHEWS** State **NC** Zip Code **28104-7888**

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

Name of Employer **ARTHUR J GALLAGHER** Occupation **VP SERVICE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2013

Transaction ID : **SA11.524**

Amount of Each Receipt this Period
5200.00
 CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED
(AUTOMATIC) SEE REATTRIBUTION

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

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

6450.00

14020020267

**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 42 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) JOHN H. TOURNET		Date of Receipt MM / DD / YYYY 12 / 30 / 2013
Mailing Address 1406 LONGLEAF CT		Transaction ID : SA11.524B
City MATTHEWS	State NC	Zip Code 28104-7888
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -2600.00 CONTRIBUTION	
Name of Employer ARTHUR J GALLAGHER	Occupation VP SERVICE	[MEMO ITEM] REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REATTRIBUTION TO SPOUSE
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00	

Full Name (Last, First, Middle Initial) JOHN H. TOURNET		Date of Receipt MM / DD / YYYY 12 / 30 / 2013
Mailing Address 1406 LONGLEAF CT		Transaction ID : SA11.635B
City MATTHEWS	State NC	Zip Code 28104-7888
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -2600.00 CONTRIBUTION	
Name of Employer ARTHUR J GALLAGHER	Occupation VP SERVICE	[MEMO ITEM] REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REDESIGNATION TO GENERAL
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00	

Full Name (Last, First, Middle Initial) JOHN H. TOURNET		Date of Receipt MM / DD / YYYY 12 / 30 / 2013
Mailing Address 1406 LONGLEAF CT		Transaction ID : SA11.637
City MATTHEWS	State NC	Zip Code 28104-7888
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
Name of Employer ARTHUR J GALLAGHER	Occupation VP SERVICE	[MEMO ITEM] REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REDESIGNATION FROM PRIMARY
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00	

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

14020020268

**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 43 OF 87
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
TONYA TOURNET

Mailing Address 1406 LONGLEAF CT

City MATTHEWS State NC Zip Code 28104-7888

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

Name of Employer HOUSEWIFE Occupation HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11.634

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

[MEMO ITEM]
 REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REATTRIBUTION FROM SPOUSE

B. Full Name (Last, First, Middle Initial)
TONYA TOURNET

Mailing Address 1406 LONGLEAF CT

City MATTHEWS State NC Zip Code 28104-7888

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

Name of Employer HOUSEWIFE Occupation HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11.634B

Amount of Each Receipt this Period
 -2600.00

CONTRIBUTION

[MEMO ITEM]
 REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REDESIGNATION TO GENERAL

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

Mailing Address 1406 LONGLEAF CT

City MATTHEWS State NC Zip Code 28104-7888

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

Name of Employer HOUSEWIFE Occupation HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11.636

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

[MEMO ITEM]
 REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

0.00

14020020269

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

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

FOR LINE NUMBER: PAGE 44 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
TOM TRAFICANO

Mailing Address **7437 S. VINCENNES AVENUE**

City CHICAGO	State IL	Zip Code 60621-3437
------------------------	--------------------	-------------------------------

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

Name of Employer 57TH STREET CAPITAL, LLC	Occupation PRIVATE INVESTOR
---	---------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM	DD	YY
10	28	2013

Transaction ID : **SA11.350**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LARRY TRUAX

Mailing Address **2028 SORRENTO PL**

City LAS CRUCES	State NM	Zip Code 88005-8228
---------------------------	--------------------	-------------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

MM	DD	YY
12	03	2013

Transaction ID : **SA11.461**

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

Mailing Address **2028 SORRENTO PL**

City LAS CRUCES	State NM	Zip Code 88005-8228
---------------------------	--------------------	-------------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

MM	DD	YY
12	03	2013

Transaction ID : **SA11.462**

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

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

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

5450.00

14020020270

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

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

FOR LINE NUMBER: PAGE 45 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)
A. MARGARET TRUCKENBRODT

Mailing Address 125 INDIAN WOOD LN

City State Zip Code
INDIAN HEAD PARK IL 60525-3729

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11.622

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ERIC L. UMSTED

Mailing Address 21 LANSING ST

City State Zip Code
HINSDALE IL 60521-3411

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

Name of Employer Occupation
CCL INDUSTRIES SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2013

Transaction ID : SA11.228

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ERIC L. UMSTED

Mailing Address 21 LANSING ST

City State Zip Code
HINSDALE IL 60521-3411

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

Name of Employer Occupation
CCL INDUSTRIES SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11.583

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

1000.00

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

14020020271

**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 46 OF 87
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) SCOTT UPP, JR.			Date of Receipt 12 / 30 / 2013
Mailing Address 334 MINNEOLA ST			Transaction ID : SA11.617
City HINSDALE	State IL	Zip Code 60521-3827	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00
Name of Employer COSOURCING PARTNERS LLC.		Occupation OWNER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) GRACE WALSTRA			Date of Receipt 11 / 19 / 2013
Mailing Address 572 ROSEBUD			Transaction ID : SA11.414
City LOMBARD	State IL	Zip Code 60148-6166	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) ANDREW WELLS			Date of Receipt 12 / 16 / 2013
Mailing Address 320 HAMBLETONIAN DR			Transaction ID : SA11.515
City OAK BROOK	State IL	Zip Code 60523-2620	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00
Name of Employer NORMANDY REMODELING		Occupation BUILDER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

14020020272

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 47 OF 87
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
STEPHEN WOODWARD

Mailing Address **4 ANDREW CT**

City **BURR RIDGE** State **IL** Zip Code **60527-8128**

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

Name of Employer **CASH COW ENTERPRISES LLC** Occupation **LLC MANAGING PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
10 / 28 / 2013

Transaction ID : **SA11.341**

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM ZIEBELL

Mailing Address **817 ELK COURT**

City **WHEATON** State **IL** Zip Code **60189-8174**

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

Name of Employer **ARTHUR J. GALLAGHER & CO.** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
10 / 28 / 2013

Transaction ID : **SA11.338**

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

750.00

89835.00

14020020273

**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 48 OF 87
	<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)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial)
CAMPAIGN SOLUTIONS

Mailing Address **117 NORTH SAINT ASAPH STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : **SB17.0001**

Amount of Each Receipt this Period
87.70

REFUND FUNDRAISING FEES

FUNDRAISING FEE CREDIT

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

87.70

87.70

14020020274

**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 87
	<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. DENISE BURESCH		Date of Disbursement MM / DD / YYYY 10 / 31 / 2013	
Mailing Address 1109 SAYLOR ST		Amount of Each Disbursement this Period 343.12	
City DOWNERS GROVE	State IL	Zip Code 60516	Transaction ID : SB17.I195
Purpose of Disbursement PAYROLL	Category/ Type 001		
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. DENISE BURESCH		Date of Disbursement MM / DD / YYYY 11 / 15 / 2013	
Mailing Address 1109 SAYLOR ST		Amount of Each Disbursement this Period 458.50	
City DOWNERS GROVE	State IL	Zip Code 60516	Transaction ID : SB17.I196
Purpose of Disbursement PAYROLL	Category/ Type 001		
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. DENISE BURESCH		Date of Disbursement MM / DD / YYYY 11 / 27 / 2013	
Mailing Address 1109 SAYLOR ST		Amount of Each Disbursement this Period 458.50	
City DOWNERS GROVE	State IL	Zip Code 60516	Transaction ID : SB17.I197
Purpose of Disbursement PAYROLL	Category/ Type 001		
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1260.12
TOTAL This Period (last page this line number only).....	

14020020275

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. DENISE BURESCH		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013	
Mailing Address 1109 SAYLOR ST		Amount of Each Disbursement this Period 458.50	
City DOWNERS GROVE	State IL	Zip Code 60516	Transaction ID : SB17.I198
Purpose of Disbursement PAYROLL		Category/ Type 001	
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. DENISE BURESCH		Date of Disbursement MM / DD / YYYY 12 / 31 / 2013	
Mailing Address 1109 SAYLOR ST		Amount of Each Disbursement this Period 458.50	
City DOWNERS GROVE	State IL	Zip Code 60516	Transaction ID : SB17.I199
Purpose of Disbursement PAYROLL		Category/ Type 001	
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. SHERRY GASKILL		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013	
Mailing Address 507 FALMORE LANE		Amount of Each Disbursement this Period 849.99	
City BOLINGBROOK	State IL	Zip Code 60440	Transaction ID : SB17.I193
Purpose of Disbursement PAYROLL		Category/ Type 001	
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1766.99
TOTAL This Period (last page this line number only).....	

14020020276

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. SHERRY GASKILL		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013	
Mailing Address 507 FALMORE LANE		Amount of Each Disbursement this Period 849.99	
City BOLINGBROOK	State IL	Zip Code 60440	Transaction ID : SB17.I194
Purpose of Disbursement PAYROLL		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. TRICIA GRENNAN		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013	
Mailing Address 2720 S HIGHLAND AVE, #576		Amount of Each Disbursement this Period 500.00	
City LOMBARD	State IL	Zip Code 60148	Transaction ID : SB17.I170
Purpose of Disbursement MEDIA		Category/ Type 004	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			
PHOTO MAKEUP SERVICES			

Full Name (Last, First, Middle Initial) C. STEPHEN GRISKO		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013	
Mailing Address 5416 LAWN		Amount of Each Disbursement this Period 1751.37	
City WESTERN SPRINGS	State IL	Zip Code 60558	Transaction ID : SB17.I187
Purpose of Disbursement PAYROLL		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3101.36
TOTAL This Period (last page this line number only).....	

14020020277

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

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

FOR LINE NUMBER: PAGE 52 OF 87
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. STEPHEN GRISKO		Date of Disbursement MM / DD / YYYY 10 / 31 / 2013	
Mailing Address 5416 LAWN		Amount of Each Disbursement this Period 1751.37 Transaction ID : SB17.I188	
City WESTERN SPRINGS	State IL	Zip Code 60558	Category/ Type 001
Purpose of Disbursement PAYROLL			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. STEPHEN GRISKO		Date of Disbursement MM / DD / YYYY 11 / 15 / 2013	
Mailing Address 5416 LAWN		Amount of Each Disbursement this Period 1751.37 Transaction ID : SB17.I189	
City WESTERN SPRINGS	State IL	Zip Code 60558	Category/ Type 001
Purpose of Disbursement PAYROLL			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. STEPHEN GRISKO		Date of Disbursement MM / DD / YYYY 11 / 27 / 2013	
Mailing Address 5416 LAWN		Amount of Each Disbursement this Period 1751.37 Transaction ID : SB17.I190	
City WESTERN SPRINGS	State IL	Zip Code 60558	Category/ Type 001
Purpose of Disbursement PAYROLL			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	5254.11
TOTAL This Period (last page this line number only)	

14020020278

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. STEPHEN GRISKO		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013
Mailing Address 5416 LAWN		Amount of Each Disbursement this Period 1751.37 Transaction ID : SB17.I191
City WESTERN SPRINGS	State IL Zip Code 60558	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. STEPHEN GRISKO		Date of Disbursement MM / DD / YYYY 12 / 31 / 2013
Mailing Address 5416 LAWN		Amount of Each Disbursement this Period 1751.37 Transaction ID : SB17.I192
City WESTERN SPRINGS	State IL Zip Code 60558	
Purpose of Disbursement PAYROLL	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. HARRY PETERS		Date of Disbursement MM / DD / YYYY 12 / 09 / 2013
Mailing Address 808 WILDWOOD COURT		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.475
City OAK BROOK	State IL Zip Code 60523-1522	
Purpose of Disbursement IN-KIND CONTRIBUTION	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3702.74
TOTAL This Period (last page this line number only).....	

14020020279

**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)
 17
 18
 19a
 19b
 20a
 20b
 20c
 21
 PAGE 54 OF 87

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. HARRY PETERS

Full Name (Last, First, Middle Initial)
Mailing Address 808 WILDWOOD COURT

City OAK BROOK State IL Zip Code 60523-1522

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 09 / 2013

Amount of Each Disbursement this Period: 200.00

Transaction ID : SB17.476

AMEX GIFT CARD

Category/Type

B. US POST OFFICE

Full Name (Last, First, Middle Initial)
Mailing Address 1314 KENSINGTON

City OAK BROOK State IL Zip Code 60523

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 11 / 22 / 2013

Amount of Each Disbursement this Period: 368.00

Transaction ID : SB17.1208

USED IN KIND CONTRIBUTION OF AMEX GIFT CARD FROM HARRY PETERS TO PURCHASE

Category/Type: 003

C. WALMART

Full Name (Last, First, Middle Initial)
Mailing Address 90 S Route 83

City Villa Park State IL Zip Code 60181

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 11 / 22 / 2013

Amount of Each Disbursement this Period: 32.00

Transaction ID : SB17.1207

USED IN KIND CONTRIBUTION OF AMEX GIFT CARD FROM HARRY PETERS TO PURCHASE

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 600.00

TOTAL This Period (last page this line number only)

14020020280

**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)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. DORA SILVIA		Date of Disbursement MM / DD / YYYY 10 / 15 / 2013	
Mailing Address 943 CREEKSIDE CIRCLE		Amount of Each Disbursement this Period 1354.00	
City NAPERVILLE	State IL	Zip Code 60563	Transaction ID : SB17.1183
Purpose of Disbursement PAYROLL		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. DORA SILVIA		Date of Disbursement MM / DD / YYYY 10 / 31 / 2013	
Mailing Address 943 CREEKSIDE CIRCLE		Amount of Each Disbursement this Period 1354.00	
City NAPERVILLE	State IL	Zip Code 60563	Transaction ID : SB17.1184
Purpose of Disbursement PAYROLL		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. DORA SILVIA		Date of Disbursement MM / DD / YYYY 11 / 15 / 2013	
Mailing Address 943 CREEKSIDE CIRCLE		Amount of Each Disbursement this Period 1354.00	
City NAPERVILLE	State IL	Zip Code 60563	Transaction ID : SB17.1185
Purpose of Disbursement PAYROLL		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

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

4062.00

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

14020020281

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. DORA SILVIA		Date of Disbursement MM / DD / YYYY 11 / 27 / 2013	
Mailing Address 943 CREEKSIDE CIRCLE		Amount of Each Disbursement this Period 1354.00	
City NAPERVILLE	State IL	Zip Code 60563	Transaction ID : SB17.186
Purpose of Disbursement PAYROLL		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" 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 MM / DD / YYYY 10 / 01 / 2013	
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 7.95	
City PHOENIZ	State AZ	Zip Code 85072	Transaction ID : SB17.182
Purpose of Disbursement BANK FEE		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" 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 MM / DD / YYYY 10 / 07 / 2013	
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 0.87	
City PHOENIZ	State AZ	Zip Code 85072	Transaction ID : SB17.185
Purpose of Disbursement BANK FEE		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1362.82
TOTAL This Period (last page this line number only).....	

14020020282

**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)

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<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 11 / 04 / 2013
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 7.95
City PHOENIZ	State AZ	Zip Code 85072
Purpose of Disbursement BANK FEE	003	Transaction ID : SB17.186
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" 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 MM / DD / YYYY 11 / 05 / 2013
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 80.84
City PHOENIZ	State AZ	Zip Code 85072
Purpose of Disbursement BANK FEE	003	Transaction ID : SB17.187
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" 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 MM / DD / YYYY 12 / 02 / 2013
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 7.95
City PHOENIZ	State AZ	Zip Code 85072
Purpose of Disbursement BANK FEE	003	Transaction ID : SB17.188
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

96.74

14020020283

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 12 / 05 / 2013	
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 91.22	
City PHOENIX	State AZ	Zip Code 85072	Transaction ID : SB17.189
Purpose of Disbursement BANK FEE		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 10 / 25 / 2013	
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 149.57	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.1100
Purpose of Disbursement BANK FEE		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			
		CC FEES	

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 10 / 25 / 2013	
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 59.26	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.1101
Purpose of Disbursement BANK FEE		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			
		CC FEES	

SUBTOTAL of Disbursements This Page (optional).....	300.05
TOTAL This Period (last page this line number only).....	

14020020284

**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 59 OF 87

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 117 NORTH SAINT ASAPH STREET

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2013			

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

Purpose of Disbursement
LIST RENTAL

003

930.60

Candidate Name

Category/
Type

Transaction ID : SB17.I102

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

REVENUE SHARE

State: District:

B. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 117 NORTH SAINT ASAPH STREET

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2013			

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

Purpose of Disbursement
BANK FEE

003

112.92

Candidate Name

Category/
Type

Transaction ID : SB17.I103

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

FUNDRAISING FEE

State: District:

C. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 117 NORTH SAINT ASAPH STREET

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2013			

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

Purpose of Disbursement
BANK FEE

003

88.48

Candidate Name

Category/
Type

Transaction ID : SB17.I104

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

CC FEES

State: District:

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

1132.00

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

14020020285

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013	
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 23.01	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.I105
Purpose of Disbursement BANK FEE		Category/ Type 003	
Candidate Name		CC FEES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013	
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 390.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.I106
Purpose of Disbursement LIST RENTAL		Category/ Type 003	
Candidate Name		REVENUE SHARE	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013	
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 3500.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.I107
Purpose of Disbursement WEB SERVICE		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3913.01
TOTAL This Period (last page this line number only).....	

14020020286

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 415.77 Transaction ID : SB17.I108
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement SUBSCRIPTIONS 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	EMAILS
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.I109
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement WEB SERVICE 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	HOSTING
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 11 / 08 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 9.23 Transaction ID : SB17.I110
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement BANK FEE 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	CC FEES
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	415.77
TOTAL This Period (last page this line number only).....	

14020020287

**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)

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<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)
Americans for Doug Truax

A. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
BANK FEE

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 08 / 2013

Amount of Each Disbursement this Period

8.00

Transaction ID : SB17.I111

FUNDRAISING FEE

B. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
LIST RENTAL

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 08 / 2013

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.I112

REVENUE SHARE

C. CAMPAIGN SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 117 NORTH SAINT ASAPH STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICE

004

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 25 / 2013

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.I113

WEB DESIGN

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

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

3068.00

14020020288

**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)

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<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 11 / 27 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 3.04 Transaction ID : SB17.I114
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement BANK FEE 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CC FEES
State: District:		

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 11 / 27 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 60.00 Transaction ID : SB17.I115
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement LIST RENTAL 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	REVENUE SHARE
State: District:		

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 12 / 03 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 36.34 Transaction ID : SB17.I116
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement BANK FEE 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CC FEES
State: District:		

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

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

99.38

14020020289

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 12 / 03 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 558.60 Transaction ID : SB17.1117
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement LIST RENTAL Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	REV SHARE
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 81.00 Transaction ID : SB17.1118
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement BANK FEE Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	FUNDRAISING FEES
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 71.55 Transaction ID : SB17.1119
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement BANK FEE Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	CC FEES
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	711.15
TOTAL This Period (last page this line number only).....	

14020020290

**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)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)		Date of Disbursement																									
A. CAMPAIGN SOLUTIONS		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>12</td><td></td><td></td><td>13</td><td></td><td></td><td>2013</td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	12			13			2013					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																
12			13			2013																					
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period																									
<table border="1"> <tr> <td>City</td><td>State</td><td>Zip Code</td> </tr> <tr> <td>ALEXANDRIA</td><td>VA</td><td>22314</td> </tr> </table>		City	State	Zip Code	ALEXANDRIA	VA	22314	<table border="1"> <tr> <td>5.69</td> </tr> </table>		5.69																	
City	State	Zip Code																									
ALEXANDRIA	VA	22314																									
5.69																											
Purpose of Disbursement BANK FEES		<table border="1"> <tr> <td>003</td> </tr> </table>		003																							
003																											
Candidate Name		Transaction ID : SB17.I120																									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		CC FEES																									
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)																											
State: District:																											

Full Name (Last, First, Middle Initial)		Date of Disbursement																									
B. CAMPAIGN SOLUTIONS		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>12</td><td></td><td></td><td>13</td><td></td><td></td><td>2013</td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	12			13			2013					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																
12			13			2013																					
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period																									
<table border="1"> <tr> <td>City</td><td>State</td><td>Zip Code</td> </tr> <tr> <td>ALEXANDRIA</td><td>VA</td><td>22314</td> </tr> </table>		City	State	Zip Code	ALEXANDRIA	VA	22314	<table border="1"> <tr> <td>96.00</td> </tr> </table>		96.00																	
City	State	Zip Code																									
ALEXANDRIA	VA	22314																									
96.00																											
Purpose of Disbursement LIST RENTAL		<table border="1"> <tr> <td>003</td> </tr> </table>		003																							
003																											
Candidate Name		Transaction ID : SB17.I121																									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		REV SHARE																									
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)																											
State: District:																											

Full Name (Last, First, Middle Initial)		Date of Disbursement																									
C. CAMPAIGN SOLUTIONS		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>12</td><td></td><td></td><td>23</td><td></td><td></td><td>2013</td><td></td><td></td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	12			23			2013					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																
12			23			2013																					
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period																									
<table border="1"> <tr> <td>City</td><td>State</td><td>Zip Code</td> </tr> <tr> <td>ALEXANDRIA</td><td>VA</td><td>22314</td> </tr> </table>		City	State	Zip Code	ALEXANDRIA	VA	22314	<table border="1"> <tr> <td>5.08</td> </tr> </table>		5.08																	
City	State	Zip Code																									
ALEXANDRIA	VA	22314																									
5.08																											
Purpose of Disbursement BANK FEES		<table border="1"> <tr> <td>003</td> </tr> </table>		003																							
003																											
Candidate Name		Transaction ID : SB17.I122																									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		CC FEES																									
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)																											
State: District:																											

SUBTOTAL of Disbursements This Page (optional).....		<table border="1"> <tr> <td>106.77</td> </tr> </table>		106.77
106.77				
TOTAL This Period (last page this line number only).....				

14020020291

**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 66 OF 87
	<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement						
Mailing Address 117 NORTH SAINT ASAPH STREET		<table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td>23</td> <td>2013</td> </tr> </table>	M M M	D D D	Y Y Y Y Y	12	23	2013
M M M	D D D	Y Y Y Y Y						
12	23	2013						
City	State	Zip Code						
ALEXANDRIA	VA	22314						
Purpose of Disbursement LIST RENTAL		Amount of Each Disbursement this Period						
	003	75.00						
Candidate Name	Category/Type	Transaction ID : SB17.123						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	REV SHARE						
State: District:								

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement						
Mailing Address 117 NORTH SAINT ASAPH STREET		<table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>02</td> <td>2013</td> </tr> </table>	M M M	D D D	Y Y Y Y Y	10	02	2013
M M M	D D D	Y Y Y Y Y						
10	02	2013						
City	State	Zip Code						
ALEXANDRIA	VA	22314						
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period						
	003	176.44						
Candidate Name	Category/Type	Transaction ID : SB17.192						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)							
State: District:								

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement						
Mailing Address 117 NORTH SAINT ASAPH STREET		<table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>02</td> <td>2013</td> </tr> </table>	M M M	D D D	Y Y Y Y Y	10	02	2013
M M M	D D D	Y Y Y Y Y						
10	02	2013						
City	State	Zip Code						
ALEXANDRIA	VA	22314						
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period						
	003	126.39						
Candidate Name	Category/Type	Transaction ID : SB17.193						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CC FEES						
State: District:								

SUBTOTAL of Disbursements This Page (optional).....	377.83
TOTAL This Period (last page this line number only).....	

14020020292

**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)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 528.11
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement BANK FEE	Category/ Type 003	Transaction ID : SB17.I94
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	FUNDRAISING FEES
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 10 / 11 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 30.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement BANK FEE	Category/ Type 003	Transaction ID : SB17.I95
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	FUNDRAISING FEE
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 10 / 11 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 22.36
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement BANK FEE	Category/ Type 003	Transaction ID : SB17.I96
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	CC FEES
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	580.47
TOTAL This Period (last page this line number only).....	

14020020293

**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 68 OF 87

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 10 / 18 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 37.17
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement BANK FEE	Category/ Type 003	Transaction ID : SB17.I97
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	CC FEES

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 10 / 18 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 42.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement BANK FEE	Category/ Type 003	Transaction ID : SB17.I98
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	FUNDRAISING FEE

Full Name (Last, First, Middle Initial) C. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 10 / 25 / 2013
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount of Each Disbursement this Period 147.82
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement BANK FEE	Category/ Type 003	Transaction ID : SB17.I99
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	FUNDRAISING FEES

SUBTOTAL of Disbursements This Page (optional).....	226.99
TOTAL This Period (last page this line number only).....	

14020020294

**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)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. CD INC.		Date of Disbursement MM / DD / YYYY 10 / 04 / 2013	
Mailing Address PO BOX 1877		Amount of Each Disbursement this Period 3000.00	
City ALEXANDRIA	State VA	Zip Code 22313	Transaction ID : SB17.I124
Purpose of Disbursement WEB SERVICE		Category/ Type 004	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement MM / DD / YYYY 10 / 04 / 2013	
Mailing Address 1593 SPRINGHILL RD		Amount of Each Disbursement this Period 2000.00	
City TYSONS CORNERS	State VA	Zip Code 22182	Transaction ID : SB17.I126
Purpose of Disbursement DATA PROCESSING SERVICES		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement MM / DD / YYYY 10 / 15 / 2013	
Mailing Address 1593 SPRINGHILL RD		Amount of Each Disbursement this Period 99.00	
City TYSONS CORNERS	State VA	Zip Code 22182	Transaction ID : SB17.I127
Purpose of Disbursement WEB SERVICE		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

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

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

5099.00

14020020295

**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)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement MM / DD / YYYY 10 / 29 / 2013
Mailing Address 1593 SPRINGHILL RD		Amount of Each Disbursement this Period 254.03 Transaction ID : SB17.1128
City TYSONS CORNERS	State VA	
Purpose of Disbursement BANK FEE	Zip Code 22182	CC FEES
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement MM / DD / YYYY 11 / 05 / 2013
Mailing Address 1593 SPRINGHILL RD		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.1129
City TYSONS CORNERS	State VA	
Purpose of Disbursement DATA PROCESSING SERVICES	Zip Code 22182	SOFTWARE SUBS
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement MM / DD / YYYY 11 / 10 / 2013
Mailing Address 1593 SPRINGHILL RD		Amount of Each Disbursement this Period 99.00 Transaction ID : SB17.1130
City TYSONS CORNERS	State VA	
Purpose of Disbursement WEB SERVICE	Zip Code 22182	EMAIL
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1853.03
TOTAL This Period (last page this line number only).....	

14020020296

**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 71 OF 87

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRINGHILL RD

Date of Disbursement

M M	D D	Y Y Y Y
11	26	2013

City State Zip Code
TYSONS CORNERS VA 22182

Amount of Each Disbursement this Period

273.50

Purpose of Disbursement
BANK FEE

003

Transaction ID : SB17.I131

Candidate Name

Category/
Type

CC FEES

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRINGHILL RD

Date of Disbursement

M M	D D	Y Y Y Y
11	26	2013

City State Zip Code
TYSONS CORNERS VA 22182

Amount of Each Disbursement this Period

170.94

Purpose of Disbursement
BANK FEE

003

Transaction ID : SB17.I132

Candidate Name

Category/
Type

CC FEES

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRINGHILL RD

Date of Disbursement

M M	D D	Y Y Y Y
12	02	2013

City State Zip Code
TYSONS CORNERS VA 22182

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
DATA PROCESSING SERVICES

003

Transaction ID : SB17.I133

Candidate Name

Category/
Type

SOFTWARE SUBS

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional)

1944.44

TOTAL This Period (last page this line number only)

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14020020297

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

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

FOR LINE NUMBER: PAGE 72 OF 87
(check only one)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRINGHILL RD

City TYSONS CORNERS State VA Zip Code 22182

Purpose of Disbursement BANK FEE Category/Type 003

Candidate Name

Office Sought: House Senate President Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 31 / 2013

Amount of Each Disbursement this Period: 547.93

Transaction ID : SB17.I134

CC FEES

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRINGHILL RD

City TYSONS CORNERS State VA Zip Code 22182

Purpose of Disbursement BANK FEE Category/Type 003

Candidate Name

Office Sought: House Senate President Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 31 / 2013

Amount of Each Disbursement this Period: 876.68

Transaction ID : SB17.I135

CC/FUNDRAISING FEES

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRINGHILL RD

City TYSONS CORNERS State VA Zip Code 22182

Purpose of Disbursement BANK FEE Category/Type 003

Candidate Name

Office Sought: House Senate President Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 01 / 2013

Amount of Each Disbursement this Period: 289.25

Transaction ID : SB17.I81

WIDGETMAKR FEES

SUBTOTAL of Disbursements This Page (optional) 1713.86

TOTAL This Period (last page this line number only)

14020020298

**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 73 OF 87
	<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. DGTR0		Date of Disbursement MM / DD / YYYY 10 / 04 / 2013
Mailing Address 7135 S. MADISON ST.		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.I136
City BURR RIDGE	State IL	
Zip Code 60527	Purpose of Disbursement MEDIA	AD
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FLS CONNECT, LLC		Date of Disbursement MM / DD / YYYY 10 / 10 / 2013
Mailing Address 7300 HUDSON BLVD SUITE 270		Amount of Each Disbursement this Period 253.53 Transaction ID : SB17.I139
City ST PAUL	State MN	
Zip Code 55128	Purpose of Disbursement PHONE SVC	CONFERENCE CALLS
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FLS CONNECT, LLC		Date of Disbursement MM / DD / YYYY 11 / 08 / 2013
Mailing Address 7300 HUDSON BLVD SUITE 270		Amount of Each Disbursement this Period 201.14 Transaction ID : SB17.I140
City ST PAUL	State MN	
Zip Code 55128	Purpose of Disbursement PHONE SVC	CONFERENCE CALLS
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	954.67
TOTAL This Period (last page this line number only).....	

14020020299

**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)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial)

A. FLS CONNECT, LLC

Mailing Address 7300 HUDSON BLVD
SUITE 270

City ST PAUL State MN Zip Code 55128

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2013

Amount of Each Disbursement this Period

143.14

Transaction ID : SB17.I141

CONFERENCE CALLS

Full Name (Last, First, Middle initial)

B. GRAVINA ONLINE STRATEGIES

Mailing Address 4000 FABER PLACE DRIVE
SUITE 300

City NORTH CHARLESTON State SC Zip Code 29405

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

003
Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2013

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.I142

MONTHLY SUB

Full Name (Last, First, Middle Initial)

C. GRAVINA ONLINE STRATEGIES

Mailing Address 4000 FABER PLACE DRIVE
SUITE 300

City NORTH CHARLESTON State SC Zip Code 29405

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

003
Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2013

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB17.I143

AP FROM Q3 REPORT - ONLINE SUBS

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3893.14

14020020300

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. HYATT LODGE		Date of Disbursement MM / DD / YYYY 10 / 21 / 2013	
Mailing Address 2815 JORIE BLVD		Amount of Each Disbursement this Period 210.00	
City OAK BROOK	State IL	Zip Code 60523	Transaction ID : SB17.1144
Purpose of Disbursement FACILITY RENTAL		Category/ Type 003	
Candidate Name		MALLON EVENT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. HYATT LODGE		Date of Disbursement MM / DD / YYYY 11 / 15 / 2013	
Mailing Address 2815 JORIE BLVD		Amount of Each Disbursement this Period 965.30	
City OAK BROOK	State IL	Zip Code 60523	Transaction ID : SB17.1145
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type 003	
Candidate Name		MALLON	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. ILLINOIS DIRECTOR OF EMPLOYMENT SECURITY		Date of Disbursement MM / DD / YYYY 10 / 30 / 2013	
Mailing Address 260 EAST INDIAN TRAIL RD		Amount of Each Disbursement this Period 290.50	
City AURORA	State IL	Zip Code 60505	Transaction ID : SB17.1146
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

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

1465.80

14020020301

**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)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. ILLINOIS DEPARTMENT OF REVENUE		Date of Disbursement MM / DD / YYYY 10 / 16 / 2013
Mailing Address PO BOX 19030		Amount of Each Disbursement this Period 253.73 Transaction ID : SB17.I201
City SPRINGFIELD	State IL	
Zip Code 62794	Purpose of Disbursement PAYROLL TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. ILLINOIS DEPARTMENT OF REVENUE		Date of Disbursement MM / DD / YYYY 11 / 14 / 2013
Mailing Address PO BOX 19030		Amount of Each Disbursement this Period 257.01 Transaction ID : SB17.I202
City SPRINGFIELD	State IL	
Zip Code 62794	Purpose of Disbursement PAYROLL TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. ILLINOIS DEPARTMENT OF REVENUE		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013
Mailing Address PO BOX 19030		Amount of Each Disbursement this Period 260.26 Transaction ID : SB17.I203
City SPRINGFIELD	State IL	
Zip Code 62794	Purpose of Disbursement PAYROLL TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	771.00
TOTAL This Period (last page this line number only).....	

14020020302

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. LISKA & ASSOCIATES		Date of Disbursement MM / DD / YYYY 10 / 31 / 2013
Mailing Address 610 N FAIRBANKS STUDIO 2EAST		Amount of Each Disbursement this Period 7250.00
City CHICAGO	State IL	Zip Code 60611
Purpose of Disbursement WEB SERVICE	Category/Type 004	
Candidate Name		Transaction ID : SB17.I200
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	AP FROM Q3 2013 REPORT (WEB DESIGN)	

Full Name (Last, First, Middle Initial) B. MAJORITY STRATEGIES		Date of Disbursement MM / DD / YYYY 10 / 31 / 2013
Mailing Address 135 PROFESSIONAL DRIVE SUITE 104		Amount of Each Disbursement this Period 90.00
City PONTE VERDE BEACH	State FL	Zip Code 32082
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name		Transaction ID : SB17.I148
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	BUS CARDS	

Full Name (Last, First, Middle Initial) C. MERCHANT SOLUTIONS		Date of Disbursement MM / DD / YYYY 10 / 03 / 2013
Mailing Address 920 N ARGONNE SUITE 200		Amount of Each Disbursement this Period 318.10
City SPOKANE	State WA	Zip Code 99212
Purpose of Disbursement BANK FEE	Category/Type 003	
Candidate Name		Transaction ID : SB17.I151
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	CC FEES	

SUBTOTAL of Disbursements This Page (optional).....	7658.10
TOTAL This Period (last page this line number only).....	

14020020303

**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 78 OF 87

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. MERCHANT SOLUTIONS		Date of Disbursement MM / DD / YYYY 11 / 04 / 2013	
Mailing Address 920 N ARGONNE SUITE 200		Amount of Each Disbursement this Period 281.05	
City SPOKANE	State WA	Zip Code 99212	Transaction ID : SB17.I152
Purpose of Disbursement BANK FEE	Category/ Type 003		
Candidate Name		CC FEES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. MERCHANT SOLUTIONS		Date of Disbursement MM / DD / YYYY 12 / 03 / 2013	
Mailing Address 920 N ARGONNE SUITE 200		Amount of Each Disbursement this Period 424.90	
City SPOKANE	State WA	Zip Code 99212	Transaction ID : SB17.I153
Purpose of Disbursement BANK FEE	Category/ Type 003		
Candidate Name		CC FEES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. MERCHANT SOLUTIONS		Date of Disbursement MM / DD / YYYY 12 / 09 / 2013	
Mailing Address 920 N ARGONNE SUITE 200		Amount of Each Disbursement this Period 200.00	
City SPOKANE	State WA	Zip Code 99212	Transaction ID : SB17.I154
Purpose of Disbursement BANK FEE	Category/ Type 003		
Candidate Name		CC FEES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	905.95
TOTAL This Period (last page this line number only).....	

14020020304

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

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

FOR LINE NUMBER: PAGE 79 OF 87

(check only one)

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

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NAME OF COMMITTEE (In Full)

Americans for Doug Truax

Full Name (Last, First, Middle Initial)

A. PHOTOS BY JERRY DALIEGE

Mailing Address 620 E. MADISON ST

City LOMBARD State IL Zip Code 60148

Purpose of Disbursement
PHOTOGRAPHY SVC

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 05 / 2013

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.1147

003

Category/
Type

Full Name (Last, First, Middle Initial)

B. REVERSE SPIN

Mailing Address 1544 SHERMER ROAD

City NORTHBROOK State IL Zip Code 60062

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 15 / 2013

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.1157

003

Category/
Type

Full Name (Last, First, Middle Initial)

C. REVERSE SPIN

Mailing Address 1544 SHERMER ROAD

City NORTHBROOK State IL Zip Code 60062

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 18 / 2013

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.1158

003

Category/
Type

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

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

8600.00

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14020020305

**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)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. REVERSE SPIN

Full Name (Last, First, Middle Initial)

Mailing Address 1544 SHERMER ROAD

City NORTHBROOK State IL Zip Code 60062

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 12/13/2013

Amount of Each Disbursement this Period: 4000.00

Transaction ID : SB17.1159

Category/Type: 003

B. STRIVE STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 72 S LAGRANGE RD, STE 7

City LAGRANGE State IL Zip Code 60525

Purpose of Disbursement SURVEY RESEARCH

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 11/07/2013

Amount of Each Disbursement this Period: 2500.00

Transaction ID : SB17.1161

Category/Type: 003

FIELD ORGANIZATION

C. US DEPT OF TREASURY

Full Name (Last, First, Middle Initial)

Mailing Address 1500 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20222

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 10/15/2013

Amount of Each Disbursement this Period: 1071.00

Transaction ID : SB17.1204

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 7571.00

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

14020020306

**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)

<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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. US DEPT OF TREASURY		Date of Disbursement MM / DD / YYYY 11 / 14 / 2013
Mailing Address 1500 PENNSYLVANIA AVE NW		Amount of Each Disbursement this Period 1147.50 Transaction ID : SB17.I205
City WASHINGTON	State DC	
Purpose of Disbursement PAYROLL TAXES	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. US DEPT OF TREASURY		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013
Mailing Address 1500 PENNSYLVANIA AVE NW		Amount of Each Disbursement this Period 1224.00 Transaction ID : SB17.I206
City WASHINGTON	State DC	
Purpose of Disbursement PAYROLL TAXES	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. US POST OFFICE		Date of Disbursement MM / DD / YYYY 10 / 10 / 2013
Mailing Address 1314 KENSINGTON ROAD		Amount of Each Disbursement this Period 26.40 Transaction ID : SB17.I171
City OAK BROOK	State IL	
Purpose of Disbursement POSTAGE	Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional)	2397.90
TOTAL This Period (last page this line number only)	

14020020307

**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 82 OF 87			
	<input checked="" type="checkbox"/> 17 <input 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)
Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. US POST OFFICE		Date of Disbursement 10 / 15 / 2013
Mailing Address 1314 KENSINGTON ROAD		Amount of Each Disbursement this Period 20.46 Transaction ID : SB17.I172
City OAK BROOK	State IL	
Zip Code 60523	Purpose of Disbursement POSTAGE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. US POST OFFICE		Date of Disbursement 10 / 23 / 2013
Mailing Address 1314 KENSINGTON ROAD		Amount of Each Disbursement this Period 5.80 Transaction ID : SB17.I173
City OAK BROOK	State IL	
Zip Code 60523	Purpose of Disbursement POSTAGE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. US POST OFFICE		Date of Disbursement 11 / 04 / 2013
Mailing Address 1314 KENSINGTON ROAD		Amount of Each Disbursement this Period 46.00 Transaction ID : SB17.I174
City OAK BROOK	State IL	
Zip Code 60523	Purpose of Disbursement POSTAGE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	72.26
TOTAL This Period (last page this line number only).....	

14020020308

**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)

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

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NAME OF COMMITTEE (In Full)

Americans for Doug Truax

Full Name (Last, First, Middle Initial) A. US POST OFFICE		Date of Disbursement							
Mailing Address 1314 KENSINGTON ROAD		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td>19</td> <td>2013</td> </tr> </table>		M M	D D	Y Y Y Y	11	19	2013
M M	D D	Y Y Y Y							
11	19	2013							
City OAK BROOK	State IL	Zip Code 60523	Amount of Each Disbursement this Period						
Purpose of Disbursement POSTAGE	Candidate Name		<table border="1"> <tr> <td>33.00</td> </tr> </table>	33.00					
33.00									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I175						
State: District:	Category/ Type 003								

Full Name (Last, First, Middle Initial) B. US POST OFFICE		Date of Disbursement							
Mailing Address 1314 KENSINGTON ROAD		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td>20</td> <td>2013</td> </tr> </table>		M M	D D	Y Y Y Y	12	20	2013
M M	D D	Y Y Y Y							
12	20	2013							
City OAK BROOK	State IL	Zip Code 60523	Amount of Each Disbursement this Period						
Purpose of Disbursement POSTAGE	Candidate Name		<table border="1"> <tr> <td>19.80</td> </tr> </table>	19.80					
19.80									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I176						
State: District:	Category/ Type 003								

Full Name (Last, First, Middle Initial) C. US POST OFFICE		Date of Disbursement							
Mailing Address 1314 KENSINGTON ROAD		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td>20</td> <td>2013</td> </tr> </table>		M M	D D	Y Y Y Y	12	20	2013
M M	D D	Y Y Y Y							
12	20	2013							
City OAK BROOK	State IL	Zip Code 60523	Amount of Each Disbursement this Period						
Purpose of Disbursement POSTAGE	Candidate Name		<table border="1"> <tr> <td>323.75</td> </tr> </table>	323.75					
323.75									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I177						
State: District:	Category/ Type 003								

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>376.55</td> </tr> </table>	376.55
376.55		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

14020020309

**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)

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

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NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. VERALITH INC.

Full Name (Last, First, Middle Initial)
Mailing Address 650 WARRENVILLE RD, STE 103

City LISLE State IL Zip Code 60532

Purpose of Disbursement AUDIO/VISUAL SVC
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2013

Amount of Each Disbursement this Period: 1450.00
Transaction ID : SB17.I178

Category/Type: 004

B. VERALITH INC.

Full Name (Last, First, Middle Initial)
Mailing Address 650 WARRENVILLE RD, STE 103

City LISLE State IL Zip Code 60532

Purpose of Disbursement AUDIO/VISUAL SVC
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 11 / 12 / 2013

Amount of Each Disbursement this Period: 3750.00
Transaction ID : SB17.I179

Category/Type: 004

C. VERITAS RISK SERVICES LLC

Full Name (Last, First, Middle Initial)
Mailing Address 1900 SPRING RD, STE 530

City OAK BROOK State IL Zip Code 60523

Purpose of Disbursement RENT
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 13 / 2013

Amount of Each Disbursement this Period: 500.00
Transaction ID : SB17.I180

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 5700.00

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

14020020310

**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 85 OF 87
	<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)
Americans for Doug Truax

A. VICTORY ENTERPRISES

Full Name (Last, First, Middle Initial)
Mailing Address 5200 SW 30TH ST, STE 7

City DAVENPORT State IA Zip Code 52802

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 12 / 30 / 2013

Amount of Each Disbursement this Period: 10000.00

Transaction ID : SB17.1181

Category/Type: 001

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 10000.00

TOTAL This Period (last page this line number only)..... 93115.00

14020020311

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Americans for Doug Truax

Transaction ID : SC1

LOAN SOURCE Full Name (Last, First, Middle Initial)
Douglas L Truax - Personal Funds

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
1264 Candlewood Court

City	State	ZIP Code	Loan from Candidate
Downers Grove	IL	60515	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
18000.00	0.00	18000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 07 / D 24 / Y 2013	M M / D D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	18000.00
TOTALS This Period (last page in this line only)	▶	18000.00

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

14020020312

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

NAME OF COMMITTEE (In Full)
Americans for Doug Truax

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Department of the Treasury	Nature of Debt (Purpose): 4th Quarter Payroll Taxes
Mailing Address Internal Revenue Service Center PO Box 804522	
City State Zip Code Cincinnati OH 45280	

Outstanding Balance Beginning This Period 0.00	Transaction ID : AP02
Amount Incurred This Period 658.02	Outstanding Balance at Close of This Period 658.02
Payment This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor IL Department of Revenue	Nature of Debt (Purpose): 4th Quarter Payroll Tax Withholding
Mailing Address PO Box 19030	
City State Zip Code Springfield IL 62794-9030	

Outstanding Balance Beginning This Period 0.00	Transaction ID : AP03
Amount Incurred This Period 222.26	Outstanding Balance at Close of This Period 222.26
Payment This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Winning Systems, Inc	Nature of Debt (Purpose): A/P fundraising consultant
Mailing Address 105 S. York Rd. 5th Floor	
City State Zip Code Elmhurst IL 60126	

Outstanding Balance Beginning This Period 0.00	Transaction ID : AP01
Amount Incurred This Period 5500.00	Outstanding Balance at Close of This Period 5500.00
Payment This Period 0.00	

1) SUBTOTALS This Period This Page (optional)	6380.28
2) TOTALS This Period (last page this line number only)	6380.28
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	18000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	24380.28

14020020313

14020020314
PO Box 4808
Oak Brook IL
60502

**SCREENED
BY THE SENATE
POST OFFICE**

U.S. POSTAGE
PAID
OAK BROOK ILL. IL
60521
JAN 24 14
AMOUNT
\$5.85
00049892-10

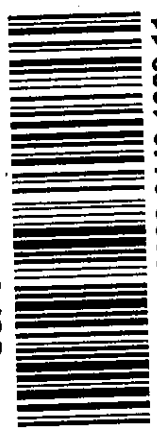


1004 20013

Secretary of the Senate
Office of Public Records
PO Box 77578
Washington DC
20013-7578

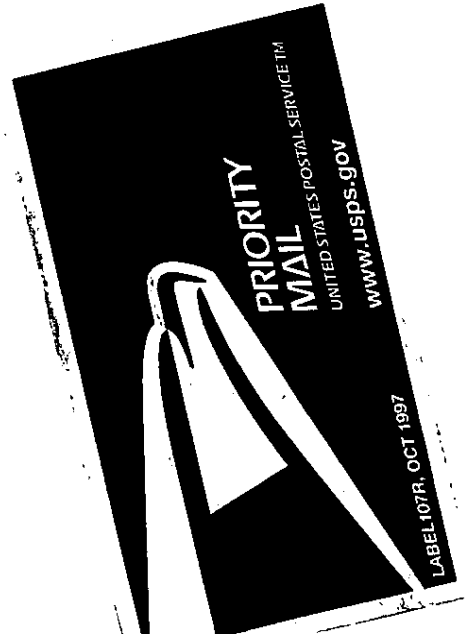


USPS TRACKING #



9114 9011 8986 6443 1328 11

LAB400R Aug 2013
7690-17-000-0689



NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7115
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL 1-24-14 _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL **X**

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

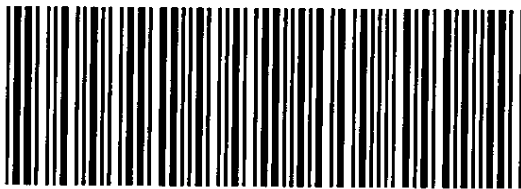
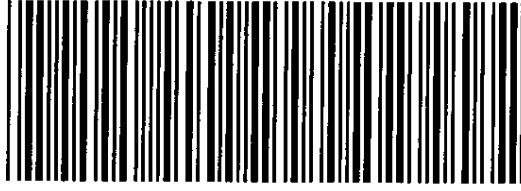
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 1-28-14

14020020315



14020020316