

REC
SECRETARY OF
PUBLIC RECORDS

14 JUL 14 PM 3:40

Office Use Only

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

OBERWEIS FOR SENATE

ADDRESS (number and street) ▼

PO BOX 274

Check if different than previously reported. (ACC)

NORTH AURORA

IL

60542

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00551531

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

IL

00

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

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

MM 04 DD 01 YYYY 2014

through

MM 06 DD 30 YYYY 2014

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

Type or Print Name of Treasurer Shari Martin

Signature of Treasurer

Shari Martin

Shari Martin

Date

MM 07 DD 11 YYYY 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.

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FEC FORM 3 (Revised 02/2003)

14020453788

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
OBERWEIS FOR SENATE

Report Covering the Period: From: **04 / 01 / 2014** To: **06 / 30 / 2014**

	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)) ..	176578.00	433025.50
(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)) ...	176578.00	433025.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	287526.11	572082.60
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	287526.11	572082.60
8. Cash on Hand at Close of Reporting Period (from Line 27)...	862132.90	
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) ..	1000000.00	

For further information contact:

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

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

14020453789

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 81

Write or Type Committee Name

OBERWEIS FOR SENATE

Report Covering the Period: From: 04 / 01 / 2014 To: 06 / 30 / 2014

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	163850.00	402000.00
(i) Itemized (use Schedule A)...	4578.00	13600.50
(ii) Unitemized	168428.00	415600.50
(iii) TOTAL of contributions from individuals	0.00	0.00
(b) Political Party Committees...	1750.00	11025.00
(c) Other Political Committees (such as PACs) ..	6400.00	6400.00
(d) The Candidate	176578.00	433025.50
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	1250.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..		
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	500000.00	1000000.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	500000.00	1000000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..		
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...		
	676578.00	1434275.50

14020453790

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	287526.11	572082.60
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	60.00
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) ►	287526.11	572142.60

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	473081.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	676578.00
25. SUBTOTAL (add Line 23 and Line 24)...	1149659.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	287526.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	862132.90

14020453791

**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 81		
	(check only one)	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Charles Allen			Date of Receipt MM / DD / YYYY 06 / 25 / 2014	
Mailing Address 156 Woodstock			Transaction ID : SA11AI.5367	
City Kenilworth	State IL	Zip Code 60043	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Sloan Valve Co		Occupation Executive Chairman		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) B. Tod Althoff			Date of Receipt MM / DD / YYYY 05 / 07 / 2014	
Mailing Address 8001 S IL Rt 31			Transaction ID : SA11AI.5236	
City Crystal Lake	State IL	Zip Code 60014	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Althoff Industries		Occupation Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) C. Gregory Baise			Date of Receipt MM / DD / YYYY 06 / 30 / 2014	
Mailing Address 7 Carriage Ln			Transaction ID : SA11AI.5380	
City Lemont	State IL	Zip Code 60439	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Illinois Manufacturers' Assn		Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	7100.00
TOTAL This Period (last page this line number only).....	

14020453792

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 81
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Christopher Barber		Date of Receipt MM/DD/YYYY 05/14/2014
Mailing Address 1520 North Dearborn Pkwy		Transaction ID : SA11AI.5258
City Chicago	State IL	Zip Code 60610
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Steptoe & Johnson	Occupation Attorney	
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) Michael Bartenhagen		Date of Receipt MM/DD/YYYY 06/25/2014
Mailing Address 1475 E Woodfield Dr, Ste 900		Transaction ID : SA11AI.5352
City Schaumburg	State IL	Zip Code 60173
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Northwestern Mutual	Occupation Wealth Management Advisor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Robert Bonifas		Date of Receipt MM/DD/YYYY 04/22/2014
Mailing Address 1111 Church Rd		Transaction ID : SA11AI.5183
City Aurora	State IL	Zip Code 60505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Alarm Detection Systems	Occupation President/CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

SUBTOTAL of Receipts This Page (optional).....	5450.00
TOTAL This Period (last page this line number only).....	

14020453793

**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 81				
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Michael Boyd			Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014		
Mailing Address 217 E Washington Ave			Transaction ID : SA11AI.5371		
City Lake Bluff	State IL	Zip Code 60044	Amount of Each Receipt this Period \$, , 250.00		
FEC ID number of contributing federal political committee. C					
Name of Employer AbbVie Inc		Occupation Executive			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 250.00			

Full Name (Last, First, Middle Initial) B. James Bruner			Date of Receipt M M / D D / Y Y Y Y 06 / 24 / 2014		
Mailing Address 202 Carobeth Dr			Transaction ID : SA11AI.5345		
City Jacksonville	State IL	Zip Code 62650	Amount of Each Receipt this Period \$, , 2600.00		
FEC ID number of contributing federal political committee. C					
Name of Employer United Contractors Midwest		Occupation CEO			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 2600.00			

Full Name (Last, First, Middle Initial) C. Ronald Bullock			Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2014		
Mailing Address 8 Blanchard Cir			Transaction ID : SA11AI.5315		
City Barrington	State IL	Zip Code 60010	Amount of Each Receipt this Period \$, , 2600.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Bison Gear		Occupation Manufacturer			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$, , 2600.00			

SUBTOTAL of Receipts This Page (optional).....			\$, , 5450.00		
TOTAL This Period (last page this line number only).....			\$, , .		

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**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 81				
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Dean Buntrock			Date of Receipt 05 / 16 / 2014
Mailing Address One Tower Ln, Ste 2242			Transaction ID : SA11AI.5280
City Oakbrook Terrace	State IL	Zip Code 60181	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer WMX Inc	Occupation Chairman		
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) B. Rosemarie Buntrock			Date of Receipt 05 / 16 / 2014
Mailing Address 300 E 8th St			Transaction ID : SA11AI.5281
City Hinsdale	State IL	Zip Code 60521	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
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) C. William Cadigan			Date of Receipt 04 / 21 / 2014
Mailing Address 191 Fuller Ln			Transaction ID : SA11AI.5179
City Winnetka	State IL	Zip Code 60093	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	5450.00
TOTAL This Period (last page this line number only).....	

14020453795

**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 81	
	(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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Eugene Carter			Date of Receipt 04 03 2014	
Mailing Address 600 W Touhy Ave, Unit 307			Transaction ID : SA11AI.5121	
City Park Ridge	State IL	Zip Code 60068	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Park Ridge Community Bank		Occupation Commercial Banker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) Robert Cloud			Date of Receipt 05 20 2014	
Mailing Address 2724 Simpson St			Transaction ID : SA11AI.5291	
City Evanston	State IL	Zip Code 60201	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Environmental Services		Occupation Independent Consultant		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) Keith Colburn			Date of Receipt 06 30 2014	
Mailing Address PO Box 1287			Transaction ID : SA11AI.5393	
City Northbrook	State IL	Zip Code 60065	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer CED Management Servicrd, Inc		Occupation Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	4100.00
TOTAL This Period (last page this line number only).....	

14020453796

**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 81
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) J.R. Davis		Date of Receipt MM / DD / YYYY 04 / 03 / 2014
Mailing Address PO Box 1690		Transaction ID : SA11AI.5124
City Barrington Hills	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1600.00
Name of Employer Davis Bancorp	Occupation Executive	Election Cycle-to-Date 2600.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) J.R. Davis		Date of Receipt MM / DD / YYYY 04 / 03 / 2014
Mailing Address PO Box 1690		Transaction ID : SA11AI.5125
City Barrington Hills	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Davis Bancorp	Occupation Executive	Election Cycle-to-Date 5200.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Christopher Davitt		Date of Receipt MM / DD / YYYY 05 / 20 / 2014
Mailing Address 280 Warwick Rd		Transaction ID : SA11AI.5298
City Lake Forest	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Kraft Foods	Occupation Tax Manager	Election Cycle-to-Date 300.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

14020453797

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 OF 81		
	(check only one)	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Dan Deufel			Date of Receipt 04 07 2014	
Mailing Address 1070 Orchard Rd			Transaction ID : SA11A1.5129	
City Montgomery	State IL	Zip Code 60538	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Superior Beverage		Occupation CEO		
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) B. Rick Doering			Date of Receipt 05 22 2014	
Mailing Address 26514 Southgate Trl			Transaction ID : SA11A1.5300	
City Barrington	State IL	Zip Code 60010	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Doering Landscape		Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Richard Duchossois			Date of Receipt 04 30 2014	
Mailing Address 69 Spring Creek Rd			Transaction ID : SA11A1.5216	
City Barrington	State IL	Zip Code 60010	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Arlington International Race		Occupation Chairman		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	

14020453798

**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 81
<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Tyrone Fahner		Date of Receipt MM / DD / YYYY 04 / 25 / 2014
Mailing Address 71 S Wacker Dr		Transaction ID : SA11AI.5200
City Chicago	State IL	Zip Code 60606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Mayer Brown LLP	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) B. William Farley		Date of Receipt MM / DD / YYYY 05 / 05 / 2014
Mailing Address 233 S Wacker Dr, Ste 2150		Transaction ID : SA11AI.5232
City Chicago	State IL	Zip Code 60606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Liam Ventures	Occupation CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Thomas Ferguson Jr		Date of Receipt MM / DD / YYYY 04 / 15 / 2014
Mailing Address 1307 W Stephenson St		Transaction ID : SA11AI.5161
City Freeport	State IL	Zip Code 61032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4600.00	

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

14020453799

**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 81
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Dave Fornoff			Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 18914 Quiver Beach Rd			Transaction ID : SA11AI.5369
City Havana	State IL	Zip Code 62644	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Fornoff Fertilizer	Occupation Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) B. Ronald Frankel			Date of Receipt MM / DD / YYYY 04 / 17 / 2014
Mailing Address 645 N Lakeview			Transaction ID : SA11AI.5167
City Vernon Hills	State IL	Zip Code 60061	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Loomcraft Textiles	Occupation Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) C. Bill Frey			Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address 1865 Les Chateaux Blvd, Unit 303			Transaction ID : SA11AI.5389
City Naples	State FL	Zip Code 34109	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

SUBTOTAL of Receipts This Page (optional).....	3150.00
TOTAL This Period (last page this line number only).....	

14020453800

**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 81
	(check only one)	
	<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"/> 15	

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NAME OF COMMITTEE (In Full)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Pat Frey		Date of Receipt M M / D D Y Y Y Y 06 / 30 2014
Mailing Address 1865 Les Chateaux Blvd, Unit 303		Transaction ID : SA11AI.5409
City Naples	State FL	Zip Code 34109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$, \$ 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$, \$ 750.00	

Full Name (Last, First, Middle Initial) Bert Frost		Date of Receipt M M / D D Y Y Y Y 04 / 21 2014
Mailing Address 531 - 8th St		Transaction ID : SA11AI.5177
City Wilmette	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$, \$ 250.00
Name of Employer CF Industries	Occupation Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$, \$ 250.00	

Full Name (Last, First, Middle Initial) Gail Funderburg		Date of Receipt M M / D D Y Y Y Y 06 / 17 2014
Mailing Address 12913 Melrose Rd		Transaction ID : SA11AI.5329
City Caledonia	State IL	Zip Code 61011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$, \$ 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$, \$ 500.00	

SUBTOTAL of Receipts This Page (optional).....	\$, \$ 1000.00
TOTAL This Period (last page this line number only).....	\$, \$

14020453801

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Hugh Funderburg		Date of Receipt MM / DD / YYYY 06 / 17 / 2014	
Mailing Address 12913 Melrose Rd		Transaction ID : SA11AI.5326	
City Caledonia	State IL	Zip Code 61011	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Name of Employer Retired	
Name of Employer Retired		Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Cindy Galvin		Date of Receipt MM / DD / YYYY 06 / 30 / 2014	
Mailing Address 71 South Wacker Dr Ste 3550		Transaction ID : SA11AI.5397	
City Chicago	State IL	Zip Code 60606	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Name of Employer Bardes Interiors	
Name of Employer Bardes Interiors		Occupation Interior Design	
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) Louis Gentine		Date of Receipt MM / DD / YYYY 06 / 30 / 2014	
Mailing Address PO Box 747		Transaction ID : SA11AI.5390	
City Elkhart Lake	State WI	Zip Code 53020	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Name of Employer Retired	
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	

SUBTOTAL of Receipts This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	5700.00

14020453802

**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 81						
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Louis Gentine		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address PO Box 747		Transaction ID : SA11AI.5392
City Elkhart Lake	State WI	Zip Code 53020
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Retired	Occupation Retired	
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) Grant Gier		Date of Receipt MM / DD / YYYY 06 / 25 / 2014
Mailing Address 106 S Wynstone Park Dr, Ste 103A		Transaction ID : SA11AI.5363
City N Barrington	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Financial Advisor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) David Grainger		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 100 Grainger Parkway		Transaction ID : SA11AI.5130
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer W. W. Grainger Inc	Occupation Sr Chairman	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3600.00	

SUBTOTAL of Receipts This Page (optional).....	5450.00
TOTAL This Period (last page this line number only).....	

14020453803

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Gary Greenberg		Date of Receipt 05 09 2014
Mailing Address 578 Roger Williams Ave Apt 303		Transaction ID : SA11AI.5249
City Highland Park State IL Zip Code 60035	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Name of Employer Self Occupation Business Consultant	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. David Grimes		Date of Receipt 06 30 2014
Mailing Address 607 N Park Rd		Transaction ID : SA11AI.5379
City LaGrange Park State IL Zip Code 60526	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C	Name of Employer Retired Occupation Retired	
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) C. Beverly Hansberger		Date of Receipt 06 30 2014
Mailing Address 1755 Persimmon Dr		Transaction ID : SA11AI.5382
City St. Charles State IL Zip Code 60174	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C	Name of Employer Retired Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

SUBTOTAL of Receipts This Page (optional).....	5450.00
TOTAL This Period (last page this line number only).....	

14020453804

**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 18 OF 81
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Earl Holt			Date of Receipt MM / DD / YYYY 06 / 17 / 2014
Mailing Address 1703 Clarendon St			Transaction ID : SA11AI.5324
City Longview	State TX	Zip Code 75601	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00
Name of Employer Retired		Occupation Retired	Election Cycle-to-Date 500.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Richard Hoskins			Date of Receipt MM / DD / YYYY 05 / 20 / 2014
Mailing Address 495 E Deerpath Rd			Transaction ID : SA11AI.5290
City Lake Forest	State IL	Zip Code 60045	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00
Name of Employer Colborne Foodbotics		Occupation President	Election Cycle-to-Date 1500.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) John Keeley			Date of Receipt MM / DD / YYYY 04 / 30 / 2014
Mailing Address 111 W Jackson Blvd, Ste #810			Transaction ID : SA11AI.5214
City Chicago	State IL	Zip Code 60604	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 350.00
Name of Employer Keeley Investment Corp		Occupation Owner	Election Cycle-to-Date 350.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

14020453805

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 81
	(check only one)	
	<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"/> 15

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NAME OF COMMITTEE (In Full)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Connie Keller		Date of Receipt M M M D D D Y Y Y Y 05 02 2014	
Mailing Address 1155 - 15th st		Transaction ID : SA11AI.5218	
City Oak Brook	State IL	Zip Code 60523	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3900.00		

Full Name (Last, First, Middle Initial) Dennis Keller		Date of Receipt M M M D D D Y Y Y Y 05 02 2014	
Mailing Address 1155 - 15th st		Transaction ID : SA11AI.5219	
City Oak Brook	State IL	Zip Code 60523	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3900.00		

Full Name (Last, First, Middle Initial) Linda Kolka		Date of Receipt M M M D D D Y Y Y Y 05 05 2014	
Mailing Address 6N601 Royce Rd		Transaction ID : SA11AI.5226	
City St. Charles	State IL	Zip Code 60175	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Self	Occupation Homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	

14020453806

**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 81		
	(check only one)	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Jack Kraus			Date of Receipt 06 24 2014	
Mailing Address 1270 North Ave			Transaction ID : SA11AI.5347	
City W Chicago	State IL	Zip Code 60185	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer PTR Truck Center		Occupation Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) John Krehbiel Jr.			Date of Receipt 04 21 2014	
Mailing Address 930 Rosemary Rd			Transaction ID : SA11AI.5181	
City Lake Forest	State IL	Zip Code 60045	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer KF Partners LLC		Occupation Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) James Langan			Date of Receipt 04 21 2014	
Mailing Address 306 Woodley Rd			Transaction ID : SA11AI.5175	
City Winnetka	State IL	Zip Code 60093	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Kirkland & Ellis		Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	

14020453807

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Rita Lashmet			Date of Receipt 04 21 2014	
Mailing Address 702 Elmwood Ave			Transaction ID : SA11AI.5173	
City Wilmette	State IL	Zip Code 60091	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Name of Employer Self	
Name of Employer Self			Occupation Designer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) Le Roy Veterinary Clinic			Date of Receipt 06 25 2014	
Mailing Address 1610 N West St			Transaction ID : SA11AI.5399	
City Le Roy	State IL	Zip Code 61752	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			Name of Employer	
Name of Employer			Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) Rudolph Magna			Date of Receipt 05 02 2014	
Mailing Address 495 N Riverside Dr, Ste 201			Transaction ID : SA11AI.5220	
City Gurnee	State IL	Zip Code 60031	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			Name of Employer Self	
Name of Employer Self			Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

14020453808

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 81
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Nancy Martin			Date of Receipt 06 / 25 / 2014
Mailing Address 14255 River Rd			Transaction ID : SA11AI.5365
City Plano	State IL	Zip Code 60545	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Gary McDaniel			Date of Receipt 06 / 30 / 2014
Mailing Address 1000 N Lake Shore Plaza			Transaction ID : SA11AI.5395
City Chicago	State IL	Zip Code 60611	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. James McGlynn Sr			Date of Receipt 04 / 04 / 2014
Mailing Address 1401 Rodenburg Rd			Transaction ID : SA11AI.5128
City Schaumburg	State IL	Zip Code 60193	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer McWilliams Electric Co Inc	Occupation Pres/CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

SUBTOTAL of Receipts This Page (optional).....	4100.00
TOTAL This Period (last page this line number only).....	

14020453809

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) James McWethy			Date of Receipt MM/DD/YYYY 06/30/2014	
Mailing Address 16 W 277 83rd St, Ste B			Transaction ID : SA11AI.5386	
City Burr Ridge	State IL	Zip Code 60527	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) Wayde Milas			Date of Receipt MM/DD/YYYY 05/14/2014	
Mailing Address 1042 Hilltop Dr			Transaction ID : SA11AI.5273	
City Lemont	State IL	Zip Code 60439	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Rarcoa		Occupation Numismatist		
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) Lawrence Miller			Date of Receipt MM/DD/YYYY 05/12/2014	
Mailing Address 400 Country Ln			Transaction ID : SA11AI.5254	
City Glenview	State IL	Zip Code 60025	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	3850.00
TOTAL This Period (last page this line number only).....	

14020453810

**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 81	
	<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)
OBERWEIS FOR SENATE

A. Full Name (Last, First, Middle Initial) Irene Napier			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 5706 Valley View Rd			Transaction ID : SA11AI.5265	
City Crystal Lake	State IL	Zip Code 60014	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Name of Employer Retired	
Name of Employer Retired			Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

B. Full Name (Last, First, Middle Initial) James W Oberweis			Date of Receipt MM / DD / YYYY 06 / 23 / 2014	
Mailing Address 1121 Heatherton Dr			Transaction ID : SA11AI.5344	
City Naperville	State IL	Zip Code 60563	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			Name of Employer Oberweis Securities	
Name of Employer Oberweis Securities			Occupation CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

C. Full Name (Last, First, Middle Initial) James W Oberweis			Date of Receipt MM / DD / YYYY 06 / 24 / 2014	
Mailing Address 1121 Heatherton Dr			Transaction ID : SA11AI.5342	
City Naperville	State IL	Zip Code 60563	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			Name of Employer Oberweis Securities	
Name of Employer Oberweis Securities			Occupation CEO	
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).....	5450.00
TOTAL This Period (last page this line number only).....	

14020453811

**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 25 OF 81	
	<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)
OBERWEIS FOR SENATE

A. Full Name (Last, First, Middle Initial) Joseph Oberweis			Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 742 Pembridge Pl			Transaction ID : SA11AI.5188	
City Sugar Grove	State IL	Zip Code 60554	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Oberweis Dairy		Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

B. Full Name (Last, First, Middle Initial) Julie K Oberweis			Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2014	
Mailing Address 3 Buckingham Dr			Transaction ID : SA11AI.5356	
City Sugar Grove	State IL	Zip Code 60554	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

C. Full Name (Last, First, Middle Initial) Julie K Oberweis			Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2014	
Mailing Address 3 Buckingham Dr			Transaction ID : SA11AI.5358	
City Sugar Grove	State IL	Zip Code 60554	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		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		

SUBTOTAL of Receipts This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	7800.00

14020453812

**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 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Samuel Oliva		Date of Receipt M M D D Y Y Y Y 06 22 2014
A. Mailing Address 3400 Dundee Rd		Transaction ID : SA11AI.5340
City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2600.00
Name of Employer Beacon Funding Corp	Occupation CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 2600.00	

Full Name (Last, First, Middle Initial) Peter Orum		Date of Receipt M M D D Y Y Y Y 04 23 2014
B. Mailing Address PO Box 384		Transaction ID : SA11AI.5193
City St. Charles	State IL	Zip Code 60174
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2100.00
Name of Employer Midwest Groundcovers	Occupation Nursery Farmer	
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) Peter Orum		Date of Receipt M M D D Y Y Y Y 04 23 2014
C. Mailing Address PO Box 384		Transaction ID : SA11AI.5194
City St. Charles	State IL	Zip Code 60174
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2600.00
Name of Employer Midwest Groundcovers	Occupation Nursery Farmer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 5200.00	

SUBTOTAL of Receipts This Page (optional).....	\$ 7300.00
TOTAL This Period (last page this line number only).....	\$

14020453813

**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 27 OF 81	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Mary Ozinga			Date of Receipt MM / DD / YYYY 05 / 23 / 2014	
A. Mailing Address 19001 Old LaGrange Rd, Ste 300			Transaction ID : SA11AI.5305	
City Mokena	State IL	Zip Code 60448	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) Martin Ozinga III			Date of Receipt MM / DD / YYYY 05 / 23 / 2014	
B. Mailing Address 19001 Old LaGrange Rd, Ste 300			Transaction ID : SA11AI.5302	
City Mokena	State IL	Zip Code 60448	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Ozinga Bros Inc		Occupation Owner		
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) Richard Pepper			Date of Receipt MM / DD / YYYY 05 / 16 / 2014	
C. Mailing Address 78 Dundee Ln			Transaction ID : SA11AI.5283	
City Barrington	State IL	Zip Code 60010	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer The Pepper Companies		Occupation General Contractor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

SUBTOTAL of Receipts This Page (optional).....			7800.00	
TOTAL This Period (last page this line number only).....				

14020453814

**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 28 OF 81	
	<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)
OBERWEIS FOR SENATE

A. Full Name (Last, First, Middle Initial) Roxelyn Pepper			Date of Receipt MM / DD / YYYY 05 / 19 / 2014	
Mailing Address 78 Dundee Ln			Transaction ID : SA11A1.5282	
City Barrington	State IL	Zip Code 60010	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2600.00	
Name of Employer The Pepper Companies		Occupation General Contractor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

B. Full Name (Last, First, Middle Initial) Richard Porter			Date of Receipt MM / DD / YYYY 06 / 10 / 2014	
Mailing Address 875 Bryant Ave			Transaction ID : SA11A1.5321	
City Winnetka	State IL	Zip Code 60093	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2600.00	
Name of Employer Kirkland & Ellis LLP		Occupation Lawyer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 4600.00		

C. Full Name (Last, First, Middle Initial) John Raitt			Date of Receipt MM / DD / YYYY 04 / 22 / 2014	
Mailing Address 1111 Mohawk Rd			Transaction ID : SA11A1.5184	
City Wilmette	State IL	Zip Code 60091	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2600.00	
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	7800.00

14020453815

**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 29 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <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)
OBERWEIS FOR SENATE

A. Full Name (Last, First, Middle Initial) Mary Raitt			Date of Receipt MM DD YYYY 04 22 2014	
Mailing Address 1111 Mohawk Rd			Transaction ID : SA11AI.5187	
City	State	Zip Code		
Wilmette	IL	60091		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 2600.00	
Name of Employer Retired			Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

B. Full Name (Last, First, Middle Initial) Tom Rakow			Date of Receipt MM DD YYYY 05 19 2014	
Mailing Address PO Box 545			Transaction ID : SA11AI.5286	
City	State	Zip Code		
Elgin	IL	60121		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 1000.00	
Name of Employer IHC Construction Co			Occupation Contractor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

C. Full Name (Last, First, Middle Initial) Michael Regan			Date of Receipt MM DD YYYY 06 26 2014	
Mailing Address 321 S Elm St			Transaction ID : SA11AI.5373	
City	State	Zip Code		
Hinsdale	IL	60521		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 1000.00	
Name of Employer Tranzact Technologies			Occupation Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	4600.00
TOTAL This Period (last page this line number only).....	

14020453816

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 81
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Lesa Rider		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 1720 Walnut Ave		Transaction ID : SA11AI.5531
City Wilmette	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$, , 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$, , 500.00	

Full Name (Last, First, Middle Initial) B. Mike Romano		Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 644 Dalewood Ln		Transaction ID : SA11AI.5349
City Hinsdale	State IL	Zip Code 60521
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$, , 1000.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$, , 2000.00	

Full Name (Last, First, Middle Initial) C. John Rowe		Date of Receipt M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address PO Box 805398		Transaction ID : SA11AI.5195
City Chicago	State IL	Zip Code 60680
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$, , 2500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$, , 4500.00	

SUBTOTAL of Receipts This Page (optional).....	\$, , 4000.00
TOTAL This Period (last page this line number only).....	\$, ,

14020453817

**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 31 OF 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) George Rusu			Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 7 S 525 Donwood Dr E			Transaction ID : SA11AI.5384	
City Naperville	State IL	Zip Code 60540	Amount of Each Receipt this Period \$, \$, \$ 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Captive Resources		Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	2600.00	

Full Name (Last, First, Middle Initial) Muneer Satter			Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address 676 N Michigan Ave, Ste #4000			Transaction ID : SA11AI.5224	
City Chicago	State IL	Zip Code 60611	Amount of Each Receipt this Period \$, \$, \$ 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Satter Investment Management		Occupation Investment Manager		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	2600.00	

Full Name (Last, First, Middle Initial) Peter Schaefer			Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014	
Mailing Address 1625 Tailgate Ln			Transaction ID : SA11AI.5295	
City Lake Forest	State IL	Zip Code 60045	Amount of Each Receipt this Period \$, \$, \$ 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Northern Illinois Food Bank		Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	1000.00	

SUBTOTAL of Receipts This Page (optional).....	\$, \$, \$ 5700.00
TOTAL This Period (last page this line number only).....	\$, \$, \$

14020453818

**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 32 OF 81
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) James Schmidt		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 1802 Cliffside Ct		Transaction ID : SA11AI.5388
City Naperville	State IL	Zip Code 60565
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Federal Health Sign	Occupation CFO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Bill Semmer		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2014
Mailing Address 888 Woodstream Ct		Transaction ID : SA11AI.5251
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer William Blair & Co LLC	Occupation financial professional	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Mark Shaw		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 33 North County St #300		Transaction ID : SA11AI.5308
City Waukegan	State IL	Zip Code 60085
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Shaw Law Ltd	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	

14020453819

**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 33 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Bingham Siebold III		Date of Receipt 05 09 2014
Mailing Address 233 Sheridan Rd		Transaction ID : SA11AI.5244
City Kenilworth	State IL	Zip Code 60043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer UBS	Occupation Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) David Sinclair		Date of Receipt 04 16 2014
Mailing Address 720 Ardsley Rd		Transaction ID : SA11AI.5162
City Winnetka	State IL	Zip Code 60093
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Laurian Capital Corp	Occupation Private Investor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Matthew Steinmetz		Date of Receipt 06 10 2014
Mailing Address 1235 W Webster Ave		Transaction ID : SA11AI.5319
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Kirkland & Ellis	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

SUBTOTAL of Receipts This Page (optional).....	3850.00
TOTAL This Period (last page this line number only).....	

14020453820

**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 34 OF 81
	<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"/> 15

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NAME OF COMMITTEE (In Full)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Charles Stencil		Date of Receipt MM / DD / YYYY 06 / 06 / 2014
A. Mailing Address 7 Dorchester Court		Transaction ID : SA11AI.5313
City Sugar Grove	State IL	Zip Code 60554
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Security Packaging	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Don Surber		Date of Receipt MM / DD / YYYY 05 / 02 / 2014
B. Mailing Address 1245 Kennicott Dr		Transaction ID : SA11AI.5222
City Lake Forest	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Surber Investments	Occupation CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) May Swan		Date of Receipt MM / DD / YYYY 04 / 25 / 2014
C. Mailing Address 726 Greenwood Ave		Transaction ID : SA11AI.5199
City Wilmette	State IL	Zip Code 60091
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Homemaker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	3850.00
TOTAL This Period (last page this line number only).....	

14020453821

**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 81
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Ted Swan			Date of Receipt MM / DD / YYYY 04 / 25 / 2014
Mailing Address 726 Greenwood Ave			Transaction ID : SA11A1.5196
City Wilmette	State IL	Zip Code 60091	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Kirkland & Ellis	Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Cheryl Uremovich			Date of Receipt MM / DD / YYYY 04 / 10 / 2014
Mailing Address 16701 West Sweedler Rd			Transaction ID : SA11A1.5134
City Manhattan	State IL	Zip Code 60447	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Starcon International	Occupation Executive		
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) C. Cheryl Uremovich			Date of Receipt MM / DD / YYYY 04 / 10 / 2014
Mailing Address 16701 West Sweedler Rd			Transaction ID : SA11A1.5135
City Manhattan	State IL	Zip Code 60447	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Starcon International	Occupation Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	

14020453822

**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 81
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Charles Vogl		Date of Receipt M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 837 Normandy Ln		Transaction ID : SA11AI.5131
City Glenview	State IL	Zip Code 60025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Northfield Industries LLC	Occupation President	
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) B. Dan Webb		Date of Receipt M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 35 W Wacker Dr, Ste 3500		Transaction ID : SA11AI.5332
City Chicago	State IL	Zip Code 60601
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Winston & Strawn	Occupation Chairman	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) C. Cheryl Wells		Date of Receipt M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 360 16th St SE		Transaction ID : SA11AI.5160
City LeMars	State IA	Zip Code 61031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Self	Occupation Homemaker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

SUBTOTAL of Receipts This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	

14020453823

**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 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Michael Wells			Date of Receipt MM DD YY 04 15 2014	
Mailing Address 360 16th St SE			Transaction ID : SA11AI.5156	
City LeMars	State IA	Zip Code 61031	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Wells Enterprises Inc		Occupation Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) Bruce White			Date of Receipt MM DD YY 04 01 2014	
Mailing Address 840 N Lake Shore Dr #2601			Transaction ID : SA11AI.5164	
City Chicago	State IL	Zip Code 60611	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer White Lodging		Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) Corrine Wood			Date of Receipt MM DD YY 06 02 2014	
Mailing Address 191 N Mayflower Rd			Transaction ID : SA11AI.5309	
City Lake Forest	State IL	Zip Code 60045	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	163850.00

14020453824

**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 81
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" 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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) Citizens for Christine Radogno		Date of Receipt M M / D D / Y Y 05 / 20 / 2014
Mailing Address 1011 State St, Ste 205		Transaction ID : SA11C.5595
City Lemont	State IL	Zip Code 60439
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00 federally acceptable funds
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) Citizens to Elect Mike Nerheim		Date of Receipt M M / D D / Y Y 05 / 16 / 2014
Mailing Address 438 N Sheridan Rd		Transaction ID : SA11C.5403
City Waukegan	State IL	Zip Code 60085
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00 federally acceptable funds
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 150.00	

Full Name (Last, First, Middle Initial) Republican Women of Wheeling Township		Date of Receipt M M / D D / Y Y 06 / 17 / 2014
Mailing Address 2004 E Sherwood Rd		Transaction ID : SA11C.5406
City Arlington Heights	State IL	Zip Code 60004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00 federally acceptable funds
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

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

14020453825

**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 39 OF 81
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" 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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) West Deerfield Rep Org			Date of Receipt 05 30 2014	
Mailing Address 825 South Waukegan Rd A8 PMB 230			Transaction ID : SA11C.5408	
City Lake Forest	State IL	Zip Code 60045	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer		Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period	
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date		

Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period	
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	1750.00

14020453826

**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 40 OF 81
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) JAMES D 'JIM' OBERWEIS		Date of Receipt 06 / 30 / 2014	
Mailing Address 3 BUCKINGHAM DR		Transaction ID : SA11D.5601	
City SUGAR GROVE	State IL	Zip Code 60554	Amount of Each Receipt this Period 6400.00 In-kind - mileage
FEC ID number of contributing federal political committee. C S2IL00119			
Name of Employer Oberweis Daily	Occupation Chairman		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1006400.00		

Full Name (Last, First, Middle Initial) B.		Date of Receipt	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) C.		Date of Receipt	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	6400.00
TOTAL This Period (last page this line number only).....	6400.00

14020453827

**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 41 OF 81
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) JAMES D 'JIM' OBERWEIS		Date of Receipt MM / DD / YY 06 / 30 / 2014	
Mailing Address 3 BUCKINGHAM DR		Transaction ID : SA13A.5600	
City SUGAR GROVE	State IL	Zip Code 60554	Amount of Each Receipt this Period 500000.00 loan
FEC ID number of contributing federal political committee. C S2IL00119			
Name of Employer Oberweis Daily	Occupation Chairman		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000000.00		

Full Name (Last, First, Middle Initial) B.		Date of Receipt MM / DD / YY	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YY	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	500000.00
TOTAL This Period (last page this line number only).....	500000.00

14020453828

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Alfano Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 308 South Fayette St		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.5478
City Alexandria	State VA	
Purpose of Disbursement Media	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. Bloomingdale Township Rep Central Committee		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 368 Cardinal Dr		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5418
City Bloomingdale	State IL	
Purpose of Disbursement Advertising	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. Richard Cape		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 430 W. Oakwood Dr		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.5468
City Barrington	State IL	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

14020453829

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 81
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Richard Cape		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 430 W. Oakwood Dr		Amount of Each Disbursement this Period 1650.00 Transaction ID : SB17.5511
City Barrington	State IL	
Zip Code 60010	Purpose of Disbursement truck rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Capital Radio Group		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 3501 East Sangamon Ave		Amount of Each Disbursement this Period 3557.25 Transaction ID : SB17.5566
City Springfield	State IL	
Zip Code 62707	Purpose of Disbursement media	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CBS Radio		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 22 W Washington St		Amount of Each Disbursement this Period 8032.50 Transaction ID : SB17.5539
City Chicago	State IL	
Zip Code 60602	Purpose of Disbursement media	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	13239.75
TOTAL This Period (last page this line number only).....	

14020453830

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Chicago Lock Box		Date of Disbursement MM / DD / YYYY 04 / 21 / 2014
Mailing Address 3400 W 111th St		Amount of Each Disbursement this Period 861.05 Transaction ID : SB17.5605
City Chicago	State IL	
Purpose of Disbursement printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. Clear Channel Broadcasting Inc		Date of Disbursement MM / DD / YYYY 05 / 06 / 2014
Mailing Address 455 Eisenhower Lane South		Amount of Each Disbursement this Period 2741.25 Transaction ID : SB17.5560
City Lombard	State IL	
Purpose of Disbursement media	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. Comcast		Date of Disbursement MM / DD / YYYY 05 / 22 / 2014
Mailing Address 1711 E Wilson St		Amount of Each Disbursement this Period 513.55 Transaction ID : SB17.5432
City Batavia	State IL	
Purpose of Disbursement internet	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional)	4115.85
TOTAL This Period (last page this line number only)	

14020453831

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Communication & Events Unlimited		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 1637 N Mobile		Amount of Each Disbursement this Period 1352.50 Transaction ID : SB17.5528
City Chicago	State IL	
Zip Code 60639	Purpose of Disbursement Media	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Creative Promotional		Date of Disbursement MM / DD / YYYY 05 / 08 / 2014
Mailing Address 7300 N Monticello		Amount of Each Disbursement this Period 1343.00 Transaction ID : SB17.5545
City Skokie	State IL	
Zip Code 60076	Purpose of Disbursement shirts	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Creative Promotional		Date of Disbursement MM / DD / YYYY 05 / 08 / 2014
Mailing Address 7300 N Monticello		Amount of Each Disbursement this Period 3582.29 Transaction ID : SB17.5547
City Skokie	State IL	
Zip Code 60076	Purpose of Disbursement shirts	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6277.79
TOTAL This Period (last page this line number only).....	

14020453832

**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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Cumulus Media Inc		Date of Disbursement MM/DD/YYYY 06/06/2014
Mailing Address 236 Greenwood Ave		Amount of Each Disbursement this Period 4913.85 Transaction ID : SB17.5563
City Bloomington	State IL	
Purpose of Disbursement media		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Cumulus Media Inc		Date of Disbursement MM/DD/YYYY 06/06/2014
Mailing Address 236 Greenwood Ave		Amount of Each Disbursement this Period 2999.65 Transaction ID : SB17.5565
City Bloomington	State IL	
Purpose of Disbursement media		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Jerry Daliege		Date of Disbursement MM/DD/YYYY 05/29/2014
Mailing Address 620 E Madison St		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.5500
City Lombard	State IL	
Purpose of Disbursement photography		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	8513.50
TOTAL This Period (last page this line number only).....	

14020453833

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Thomas Deets		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 6021 Midway Circle		Amount of Each Disbursement this Period 212.92 Transaction ID : SB17.5444
City Belleville	State IL	
Purpose of Disbursement reimbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Thomas Deets		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 6021 Midway Circle		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.5467
City Belleville	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Thomas Deets		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 6021 Midway Circle		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5491
City Belleville	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	3712.92
TOTAL This Period (last page this line number only)	

14020453834

**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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial)

A. Thomas Deets

Date of Disbursement

M	M	D	D	Y	Y
05		31		2014	

Mailing Address 6021 Midway Circle

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.5507

City State Zip Code
Belleville IL 62223

Purpose of Disbursement
payroll

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Thomas Deets

Date of Disbursement

M	M	D	D	Y	Y
06		30		2014	

Mailing Address 6021 Midway Circle

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.5515

City State Zip Code
Belleville IL 62223

Purpose of Disbursement
payroll

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Dolfin Inc

Date of Disbursement

M	M	D	D	Y	Y
04		01		2014	

Mailing Address 112 Rockford

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.5464

City State Zip Code
Forest Park IL 60130

Purpose of Disbursement
payroll

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

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

9000.00

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

14020453835

**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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Dolfin Inc		Date of Disbursement MM / DD / YYYY 04 / 07 / 2014	
Mailing Address 112 Rockford		Amount of Each Disbursement this Period 1175.31 Transaction ID : SB17.5446	
City Forest Park	State IL		Zip Code 60130
Purpose of Disbursement reimbursement			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Home Depot		Date of Disbursement MM / DD / YYYY 04 / 03 / 2014	
Mailing Address 5501 Belleville Crossing		Amount of Each Disbursement this Period 211.11 Transaction ID : SB17.5446.0 [MEMO ITEM]	
City Belleville	State IL		Zip Code 62226
Purpose of Disbursement conduit for signs			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ruby Receptionist		Date of Disbursement MM / DD / YYYY 04 / 03 / 2014	
Mailing Address 1331 NW Lovejoy Street #875		Amount of Each Disbursement this Period 332.97 Transaction ID : SB17.5446.1 [MEMO ITEM]	
City Portland	State OR		Zip Code 97209
Purpose of Disbursement answering service			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1175.31
TOTAL This Period (last page this line number only).....	

14020453836

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

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

FOR LINE NUMBER:
(check only one)

PAGE 50 OF 81

<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Budgetel Inn & Suites		Date of Disbursement M M D D Y Y Y Y 04 03 2014	
Mailing Address 675 Roosevelt Rd		Amount of Each Disbursement this Period 330.00 Transaction ID : SB17.5446.2 [MEMO ITEM]	
City Glen Ellyn	State IL		Zip Code 60137
Purpose of Disbursement staff lodging	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Dolfin Inc		Date of Disbursement M M D D Y Y Y Y 05 05 2014	
Mailing Address 112 Rockford		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.5542	
City Forest Park	State IL		Zip Code 60130
Purpose of Disbursement payroll	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Dolfin Inc		Date of Disbursement M M D D Y Y Y Y 05 21 2014	
Mailing Address 112 Rockford		Amount of Each Disbursement this Period 2053.56 Transaction ID : SB17.5455	
City Forest Park	State IL		Zip Code 60130
Purpose of Disbursement reimbursement	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	7053.56
TOTAL This Period (last page this line number only).....	

14020453837

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Ruby Receptionist		Date of Disbursement MM/DD/YYYY 05/21/2014
Mailing Address 1331 NW Lovejoy Street #875		Amount of Each Disbursement this Period 670.13 Transaction ID : SB17.5455.0
City Portland	State OR	
Purpose of Disbursement receptionist	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Telepoint Communications		Date of Disbursement MM/DD/YYYY 05/21/2014
Mailing Address 1020 Kings Hwy N		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5455.1
City Cherry Hill	State NJ	
Purpose of Disbursement communication	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) C. Mail Chimp		Date of Disbursement MM/DD/YYYY 05/21/2014
Mailing Address 512 Means St, Ste 404		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.5455.2
City Atlanta	State GA	
Purpose of Disbursement email	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM]	

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

14020453838

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Ruby Receptionist		Date of Disbursement MM DD / Y Y Y Y 04 30 / 2014
Mailing Address 1331 NW Lovejoy Street #875		Amount of Each Disbursement this Period 8466.88 Transaction ID : SB17.5455.4
City Portland	State OR	
Purpose of Disbursement receptionist		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Dolfin Inc		Date of Disbursement MM DD / Y Y Y Y 06 04 / 2014
Mailing Address 112 Rockford		Amount of Each Disbursement this Period 8000.00 Transaction ID : SB17.5548
City Forest Park	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Liz Eilers		Date of Disbursement MM DD / Y Y Y Y 04 01 / 2014
Mailing Address 50 Lucky Horseshoe		Amount of Each Disbursement this Period 466.88 Transaction ID : SB17.5443
City Riverton	State IL	
Purpose of Disbursement reimbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	8466.88
TOTAL This Period (last page this line number only).....	

14020453839

**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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Liz Eilers		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 50 Lucky Horseshoe		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.5469
City Riverton	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Liz Eilers		Date of Disbursement MM / DD / YYYY 04 / 16 / 2014
Mailing Address 50 Lucky Horseshoe		Amount of Each Disbursement this Period 352.43 Transaction ID : SB17.5451
City Riverton	State IL	
Purpose of Disbursement reimbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Liz Eilers		Date of Disbursement MM / DD / YYYY 04 / 16 / 2014
Mailing Address 50 Lucky Horseshoe		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.5483
City Riverton	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2352.43
TOTAL This Period (last page this line number only).....	

14020453840

**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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Liz Eilers		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014	
Mailing Address 50 Lucky Horseshoe		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.5493	
City Riverton	State IL	Zip Code 62561	Category/ Type
Purpose of Disbursement payroll		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			
Full Name (Last, First, Middle Initial) B. Liz Eilers		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address 50 Lucky Horseshoe		Amount of Each Disbursement this Period 356.52 Transaction ID : SB17.5454	
City Riverton	State IL	Zip Code 62561	Category/ Type
Purpose of Disbursement reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			
Full Name (Last, First, Middle Initial) C. Liz Eilers		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 50 Lucky Horseshoe		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.5496	
City Riverton	State IL	Zip Code 62561	Category/ Type
Purpose of Disbursement payroll		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			
SUBTOTAL of Disbursements This Page (optional).....		2856.52	
TOTAL This Period (last page this line number only).....			

14020453841

**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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial)

A. Liz Eilers

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
05		22		2014			

Mailing Address 50 Lucky Horseshoe

City Riverton State IL Zip Code 62561

Amount of Each Disbursement this Period

411.74

Purpose of Disbursement
reimbursement

Transaction ID : SB17.5456

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Liz Eilers

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
05		30		2014			

Mailing Address 50 Lucky Horseshoe

City Riverton State IL Zip Code 62561

Amount of Each Disbursement this Period

1250.00

Purpose of Disbursement
payroll

Transaction ID : SB17.5503

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Liz Eilers

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
06		02		2014			

Mailing Address 50 Lucky Horseshoe

City Riverton State IL Zip Code 62561

Amount of Each Disbursement this Period

245.00

Purpose of Disbursement
reimbursement

Transaction ID : SB17.5457

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

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

1906.74

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

14020453842

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement MM/DD/YYYY 06/02/2014	
Mailing Address 1311 S 6th St		Amount of Each Disbursement this Period 105.00 Transaction ID : SB17.5457.0	
City Springfield	State IL		Zip Code 62703
Purpose of Disbursement phone	Category/ Type		
Candidate Name		[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Liz Eilers		Date of Disbursement MM/DD/YYYY 06/13/2014	
Mailing Address 50 Lucky Horseshoe		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5513	
City Riverton	State IL		Zip Code 62561
Purpose of Disbursement payroll	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. Liz Eilers		Date of Disbursement MM/DD/YYYY 06/30/2014	
Mailing Address 50 Lucky Horseshoe		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.5518	
City Riverton	State IL		Zip Code 62561
Purpose of Disbursement payroll	Category/ Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

14020453843

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Electoral Advantage		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014	
Mailing Address PO Box 852		Amount of Each Disbursement this Period 42750.00 Transaction ID : SB17.5588	
City Park Ridge	State IL		Zip Code 60068
Purpose of Disbursement media & mailing lists	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. First State Bank		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014	
Mailing Address 706 Washington St		Amount of Each Disbursement this Period 143.89 Transaction ID : SB17.5426	
City Mendota	State IL		Zip Code 61342
Purpose of Disbursement credit card fees	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. First State Bank		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014	
Mailing Address 706 Washington St		Amount of Each Disbursement this Period 303.22 Transaction ID : SB17.5429	
City Mendota	State IL		Zip Code 61342
Purpose of Disbursement credit card fees	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	43197.11
TOTAL This Period (last page this line number only).....	

14020453844

**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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Global Payments		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 10705 Red Run Boulevard		Amount of Each Disbursement this Period 132.60 Transaction ID : SB17.5428
City OWinga Mills	State MD	
Purpose of Disbursement credit card fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. Illini Radio Group		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 2603 W Bradley Ave		Amount of Each Disbursement this Period 2652.00 Transaction ID : SB17.5554
City Champaign	State IL	
Purpose of Disbursement media		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. James Jones Consulting		Date of Disbursement MM / DD / YYYY 05 / 19 / 2014
Mailing Address PO Box 10558		Amount of Each Disbursement this Period 30000.00 Transaction ID : SB17.5497
City Chicago	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	32784.60
TOTAL This Period (last page this line number only).....	

14020453845

**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 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. James Jones Consulting			Date of Disbursement M M M D Y Y Y Y 05 28 2014	
Mailing Address PO Box 10558			Amount of Each Disbursement this Period 10000.00	
City Chicago	State IL	Zip Code 60610	Transaction ID : SB17.5499	
Purpose of Disbursement payroll		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) B. K&R Consultants			Date of Disbursement M M M D Y Y Y Y 04 01 2014	
Mailing Address 1064 Cheltenham Road			Amount of Each Disbursement this Period 1200.00	
City Elk Grove Village	State IL	Zip Code 60007	Transaction ID : SB17.5474	
Purpose of Disbursement payroll		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) C. K&R Consultants			Date of Disbursement M M M D Y Y Y Y 04 30 2014	
Mailing Address 1064 Cheltenham Road			Amount of Each Disbursement this Period 3000.00	
City Elk Grove Village	State IL	Zip Code 60007	Transaction ID : SB17.5488	
Purpose of Disbursement payroll		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	14200.00
TOTAL This Period (last page this line number only).....	

14020453846

**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 60 OF 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. K&R Consultants		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address 1064 Cheltenham Road		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.5502
City Elk Grove Village	State IL	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. K&R Consultants		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 1064 Cheltenham Road		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.5517
City Elk Grove Village	State IL	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. Law Office of William Cadigan		Date of Disbursement MM / DD / YYYY 06 / 07 / 2014
Mailing Address 33 N Dearborn St, Ste 2350		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.5433
City Chicago	State IL	
Purpose of Disbursement Legal services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	9000.00
TOTAL This Period (last page this line number only).....	

14020453847

**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 61 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. James R Leahy		Date of Disbursement MM/DD/YYYY 04/01/2014
Mailing Address 1210 Half Day Rd		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.5473
City Bannockburn	State IL	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. James R Leahy		Date of Disbursement MM/DD/YYYY 04/07/2014
Mailing Address 1210 Half Day Rd		Amount of Each Disbursement this Period 242.28 Transaction ID : SB17.5445
City Bannockburn	State IL	
Purpose of Disbursement reimbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. James R Leahy		Date of Disbursement MM/DD/YYYY 04/17/2014
Mailing Address 1210 Half Day Rd		Amount of Each Disbursement this Period 464.17 Transaction ID : SB17.5452
City Bannockburn	State IL	
Purpose of Disbursement reimbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	1456.45
TOTAL This Period (last page this line number only).....	

14020453848

**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)
OBERWEIS FOR SENATE

A. Jason Leviskas Full Name (Last, First, Middle Initial) Mailing Address 2708 Bucknell Dr City Rockford State IL Zip Code 61109 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Date of Disbursement M M M D D D Y Y Y Y 05 30 2014 Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.5505
B. Jason Leviskas Full Name (Last, First, Middle Initial) Mailing Address 2708 Bucknell Dr City Rockford State IL Zip Code 61109 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Date of Disbursement M M M D D D Y Y Y Y 06 18 2014 Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.5514
C. Jason Leviskas Full Name (Last, First, Middle Initial) Mailing Address 2708 Bucknell Dr City Rockford State IL Zip Code 61109 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Date of Disbursement M M M D D D Y Y Y Y 06 30 2014 Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.5520
SUBTOTAL of Disbursements This Page (optional).....		3750.00
TOTAL This Period (last page this line number only).....		

14020453849

**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 63 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Theodore Livengood		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 650 E. Weston Ct		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.5471
City Round Lake Beach	State IL	
Purpose of Disbursement payroll	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Theodore Livengood		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 650 E. Weston Ct		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5492
City Round Lake Beach	State IL	
Purpose of Disbursement payroll	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Theodore Livengood		Date of Disbursement MM / DD / YYYY 05 / 31 / 2014
Mailing Address 650 E. Weston Ct		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5509
City Round Lake Beach	State IL	
Purpose of Disbursement payroll	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

14020453850

**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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Theodore Livengood		Date of Disbursement 06 / 30 / 2014	
Mailing Address 650 E. Weston Ct		Amount of Each Disbursement this Period 2500.00	
City Round Lake Beach	State IL	Zip Code 60073	Transaction ID : SB17.5516
Purpose of Disbursement payroll		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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. Ben Marcum		Date of Disbursement 04 / 30 / 2014	
Mailing Address 46 E Highland		Amount of Each Disbursement this Period 1000.00	
City Bristol	State IL	Zip Code 60512	Transaction ID : SB17.5489
Purpose of Disbursement payroll		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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. Ben Marcum		Date of Disbursement 05 / 30 / 2014	
Mailing Address 46 E Highland		Amount of Each Disbursement this Period 1750.00	
City Bristol	State IL	Zip Code 60512	Transaction ID : SB17.5504
Purpose of Disbursement payroll		Category/ Type	
Candidate Name		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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).....		5250.00	
TOTAL This Period (last page this line number only).....			

14020453851

**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 65 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Ben Marcum		Date of Disbursement MM/DD/YYYY 06/30/2014
Mailing Address 46 E Highland		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5519
City Bristol	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Edward Marshall		Date of Disbursement MM/DD/YYYY 04/10/2014
Mailing Address 5728 N Meade		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.5476
City Chicago	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Matt Middleton		Date of Disbursement MM/DD/YYYY 04/16/2014
Mailing Address 1330 Blair Ln		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.5484
City Hoffman Estates	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	4800.00
TOTAL This Period (last page this line number only).....	

14020453852

**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 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Midwest Family Broadcasting		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 2830 Sandy Hollow Rd		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.5556
City Rockford	State IL	
Purpose of Disbursement media	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. Carrie Miller		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 607 Stone Circle Court		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.5475
City Schaumburg	State IL	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. Carrie Miller		Date of Disbursement MM / DD / YYYY 04 / 10 / 2014
Mailing Address 607 Stone Circle Court		Amount of Each Disbursement this Period 238.27 Transaction ID : SB17.5450
City Schaumburg	State IL	
Purpose of Disbursement reimbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional)	2438.27
TOTAL This Period (last page this line number only)	

14020453853

**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 67 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. MWW DPP, LLC		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 401 S Main, Ste300		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5458
City Naperville	State IL	
Purpose of Disbursement rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. MWW DPP, LLC		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address 401 S Main, Ste300		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5459
City Naperville	State IL	
Purpose of Disbursement rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. MWW DPP, LLC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2014
Mailing Address 401 S Main, Ste300		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.5460
City Naperville	State IL	
Purpose of Disbursement rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

14020453854

**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 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. My Vote Counts Inc		Date of Disbursement MM/DD/YYYY 04/01/2014
Mailing Address 1210 Half Day Rd		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5463
City Bannockburn	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Neuhoff Media		Date of Disbursement MM/DD/YYYY 06/06/2014
Mailing Address 250 N Water St # 100		Amount of Each Disbursement this Period 4811.21 Transaction ID : SB17.5561
City Decatur	State IL	
Purpose of Disbursement media		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Neuhoff Media		Date of Disbursement MM/DD/YYYY 06/06/2014
Mailing Address 250 N Water St # 100		Amount of Each Disbursement this Period 4015.62 Transaction ID : SB17.5562
City Decatur	State IL	
Purpose of Disbursement media		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	10326.83
TOTAL This Period (last page this line number only).....	

14020453855

**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 69 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Neuhoff Media		Date of Disbursement MM/DD/YYYY 06/10/2014
Mailing Address 250 N Water St # 100		Amount of Each Disbursement this Period 6318.05 Transaction ID : SB17.5572
City Decatur	State IL	
Purpose of Disbursement media	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Northwestern Suburban Republican Lincoln Day Dinner		Date of Disbursement MM/DD/YYYY 05/15/2014
Mailing Address P.O. Box 59207		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.5417
City Schaumburg	State IL	
Purpose of Disbursement Tickets	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Nyhan and Friends Inc		Date of Disbursement MM/DD/YYYY 04/01/2014
Mailing Address 1701 East Lake Avenue, Ste 335		Amount of Each Disbursement this Period 5500.00 Transaction ID : SB17.5462
City Glenview	State IL	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11918.05
TOTAL This Period (last page this line number only).....	

14020453856

**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 70 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Nyhan and Friends Inc		Date of Disbursement MM/DD/YYYY 05/01/2014
Mailing Address 1701 East Lake Avenue, Ste 335		Amount of Each Disbursement this Period 5500.00 Transaction ID : SB17.5494
City Glenview	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Nyhan and Friends Inc		Date of Disbursement MM/DD/YYYY 06/01/2014
Mailing Address 1701 East Lake Avenue, Ste 335		Amount of Each Disbursement this Period 5500.00 Transaction ID : SB17.5510
City Glenview	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. JAMES D 'JIM' OBERWEIS		Date of Disbursement MM/DD/YYYY 06/30/2014
Mailing Address 3 BUCKINGHAM DR		Amount of Each Disbursement this Period 6400.00 Transaction ID : SB17.5602
City SUGAR GROVE	State IL	
Purpose of Disbursement In-kind - mileage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 00		

SUBTOTAL of Disbursements This Page (optional).....	17400.00
TOTAL This Period (last page this line number only).....	

14020453857

**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 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement MM DD YYYY 04 21 2014
Mailing Address 3070 U.S. 34		Amount of Each Disbursement this Period 61.37 Transaction ID : SB17.5437
City Oswego	State IL	
Purpose of Disbursement office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement MM DD YYYY 05 13 2014
Mailing Address 3070 U.S. 34		Amount of Each Disbursement this Period 35.53 Transaction ID : SB17.5438
City Oswego	State IL	
Purpose of Disbursement office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. Paypal		Date of Disbursement MM DD YYYY 04 01 2014
Mailing Address 2211 North First St		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.5533
City San Jose	State CA	
Purpose of Disbursement credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	126.90
TOTAL This Period (last page this line number only).....	

14020453858

**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 72 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Paypal			Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 2211 North First St			Amount of Each Disbursement this Period 88.01 Transaction ID : SB17.5536
City San Jose	State CA	Zip Code 95131	
Purpose of Disbursement credit card fees		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: _____ District: _____	

Full Name (Last, First, Middle Initial) B. Paypal			Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address 2211 North First St			Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.5534
City San Jose	State CA	Zip Code 95131	
Purpose of Disbursement credit card fee		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: _____ District: _____	

Full Name (Last, First, Middle Initial) C. Paypal			Date of Disbursement MM / DD / YYYY 05 / 31 / 2014
Mailing Address 2211 North First St			Amount of Each Disbursement this Period 83.22 Transaction ID : SB17.5537
City San Jose	State CA	Zip Code 95131	
Purpose of Disbursement credit card fees		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: _____ District: _____	

SUBTOTAL of Disbursements This Page (optional).....	201.23
TOTAL This Period (last page this line number only).....	

14020453859

**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 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Paypal		Date of Disbursement MM / DD / YYYY 06 / 01 / 2014
Mailing Address 2211 North First St		Amount of Each Disbursement this Period 30.00 Transaction ID : SB17.5535
City San Jose	State CA	
Purpose of Disbursement credit card fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Paypal		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 2211 North First St		Amount of Each Disbursement this Period 179.43 Transaction ID : SB17.5538
City San Jose	State CA	
Purpose of Disbursement credit card fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Roseanna Pulido		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 1931 Champlain #20		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.5470
City Ottawa	State IL	
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	959.43
TOTAL This Period (last page this line number only).....	

14020453860

**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

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NAME OF COMMITTEE (In Full)
OBERWEIS FOR SENATE

A. Roseanna Pulido

Full Name (Last, First, Middle Initial)
Mailing Address 1931 Champlain #20

City Ottawa State IL Zip Code 61350

Purpose of Disbursement reimbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 04 / 07 / 2014

Amount of Each Disbursement this Period 245.42

Transaction ID : SB17.5447

Category/ Type

B. Quantum Action Partners Ltd

Full Name (Last, First, Middle Initial)
Mailing Address 895 E Schirra Drive, Palatine, Ill

City Palatine State IL Zip Code 60074

Purpose of Disbursement payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 04 / 01 / 2014

Amount of Each Disbursement this Period 1500.00

Transaction ID : SB17.5466

Category/ Type

C. Radio Group

Full Name (Last, First, Middle Initial)
Mailing Address 3905 Progress Blvd

City Peru State IL Zip Code 61354

Purpose of Disbursement media

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 06 / 06 / 2014

Amount of Each Disbursement this Period 5194.35

Transaction ID : SB17.5568

Category/ Type

SUBTOTAL of Disbursements This Page (optional)..... 6939.77

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

14020453861

**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 75 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Reverse Spin		Date of Disbursement M M D D Y Y Y Y 04 16 2014
Mailing Address 1544 Shermer		Amount of Each Disbursement this Period 8000.00 Transaction ID : SB17.5481
City Northbrook	State IL	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Reverse Spin		Date of Disbursement M M D D Y Y Y Y 05 05 2014
Mailing Address 1544 Shermer		Amount of Each Disbursement this Period 6000.00 Transaction ID : SB17.5495
City Northbrook	State IL	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Reverse Spin		Date of Disbursement M M D D Y Y Y Y 06 02 2014
Mailing Address 1544 Shermer		Amount of Each Disbursement this Period 6000.00 Transaction ID : SB17.5512
City Northbrook	State IL	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	

14020453862

**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 76 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Sangamon County Rep Central Comm		Date of Disbursement MM DD YYYY 06 16 2014
Mailing Address 1132 E Sangamon Ave		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5590
City Springfield	State IL	
Purpose of Disbursement Advertising-Sponsorship	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. Theresa Shumpert		Date of Disbursement MM DD YYYY 04 01 2014
Mailing Address 10654 S State St		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5472
City Chicago	State IL	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. Team Concept Printing		Date of Disbursement MM DD YYYY 04 21 2014
Mailing Address 540 Tower Blvd		Amount of Each Disbursement this Period 865.00 Transaction ID : SB17.5603
City Carol Stream	State IL	
Purpose of Disbursement printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	2865.00
TOTAL This Period (last page this line number only).....	

14020453863

**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 77 OF 81			
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. The News Gazette Inc		Date of Disbursement MM/DD/YYYY 06/06/2014
Mailing Address 15 Main St		Amount of Each Disbursement this Period 3337.95 Transaction ID : SB17.5558
City Champaign	State IL	
Purpose of Disbursement media	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Townsquare Media		Date of Disbursement MM/DD/YYYY 06/10/2014
Mailing Address 3901 Brendenwood Road		Amount of Each Disbursement this Period 6107.25 Transaction ID : SB17.5570
City Rockford	State IL	
Purpose of Disbursement media	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement MM/DD/YYYY 04/15/2014
Mailing Address 11555 W Touhy Ave		Amount of Each Disbursement this Period 647.00 Transaction ID : SB17.5549
City Chicago	State IL	
Purpose of Disbursement airfare	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10092.20
TOTAL This Period (last page this line number only).....	

14020453864

**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 81	
	<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. US Postal Service		Date of Disbursement MM / DD / YYYY 04 / 07 / 2014
Mailing Address 65 S Randall Rd		Amount of Each Disbursement this Period 146.00 Transaction ID : SB17.5611
City North Aurora	State IL	
Zip Code 60542	Purpose of Disbursement postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. US Postal Service		Date of Disbursement MM / DD / YYYY 04 / 10 / 2014
Mailing Address 65 S Randall Rd		Amount of Each Disbursement this Period 19.99 Transaction ID : SB17.5440
City North Aurora	State IL	
Zip Code 60542	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. US Postal Service		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 65 S Randall Rd		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.5441
City North Aurora	State IL	
Zip Code 60542	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	214.99
TOTAL This Period (last page this line number only).....	

14020453865

**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 79 OF 81

<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)
OBERWEIS FOR SENATE

Full Name (Last, First, Middle Initial) A. Jake Weiner		Date of Disbursement M M / D D Y Y Y Y 04 24 2014	
Mailing Address 1064 Cheltenham Rd		Amount of Each Disbursement this Period 300.00	
City Elk Grove Village	State IL	Zip Code 60007	Transaction ID : SB17.5486
Purpose of Disbursement payroll		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. WTMX		Date of Disbursement M M / D D Y Y Y Y 06 06 2014	
Mailing Address 130 E Randolph St		Amount of Each Disbursement this Period 1275.00	
City Chicago	State IL	Zip Code 60601	Transaction ID : SB17.5552
Purpose of Disbursement Media		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. Yes! Press		Date of Disbursement M M / J D / Y Y Y Y 06 19 2014	
Mailing Address 3604 South Iron St		Amount of Each Disbursement this Period 4430.00	
City Chicago	State IL	Zip Code 60609	Transaction ID : SB17.5442
Purpose of Disbursement printing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	6005.00
TOTAL This Period (last page this line number only).....	286197.08

14020453866

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)

Transaction ID : SC/10.4237

OBERWEIS FOR SENATE

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

[PERSONAL FUNDS]

Election: 2014

JAMES D 'JIM' OBERWEIS

Primary

General

Other (specify) ▼

Mailing Address

3 BUCKINGHAM DR

City

State

ZIP Code

SUGAR GROVE

IL

60554

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

500000.00

0.00

500000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M

D 31 D

2013

12/31/2014

1.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

SUBTOTALS This Period This Page (optional)...

500000.00

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

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

14020453867

**SCHEDULE C (FEC Form 3)
LOANS**

Transaction ID : SC/10.5600
NAME OF COMMITTEE (In Full)
OBERWEIS FOR SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial) JAMES D 'JIM' OBERWEIS	[PERSONAL FUNDS]	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3 BUCKINGHAM DR		

City	State	ZIP Code
SUGAR GROVE	IL	60554

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500000.00	0.00	500000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	06/30/2014	6/30/15	1.00 % (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).....	500000.00
TOTALS This Period (last page in this line only)...	1000000.00

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

14020453868

14020453869



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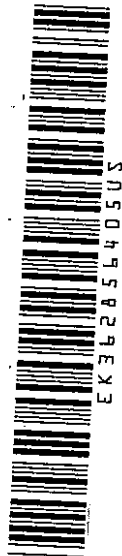
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Delivery Options
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Date Accepted (MM/DD/YY)	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON 10:30 AM Delivery Fee	Insurance Fee \$	COD Fee \$
Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM	10:30 AM Delivery Fee	Return Receipt Fee \$	Live Animal/Transportation Fee \$
Weight lbs. ozs.	Sunday/Holiday Premium Fee \$	Total Postage & Fees \$	
<input type="checkbox"/> Flat Rate	Acceptance Employee Initials		
DELIVERY (POSTAL SERVICE USE ONLY)			
Delivery Attempt (MM/DD/YY) Time	Employee Signature		
Delivery Attempt (MM/DD/YY) Time	Employee Signature		

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HAND DELIVERED _____ Date of Receipt

USPS FIRST CLASS MAIL _____ Postmark

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USPS PRIORITY MAIL _____ Postmark

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USPS EXPRESS MAIL _____ Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DEL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

NEXT BUSINESS DAY DELIVERY

RECEIVED FROM FEDERAL ELECTION COMMISSION _____ Date of Receipt

POSTMARK ILLEGIBLE NO POSTMARK

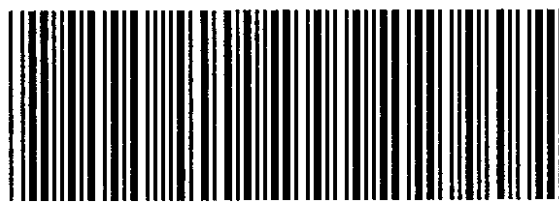
FAX _____ Date of Receipt

OTHER _____ Date of Receipt or Postmark

PREPARER DH DATE PREPARED 7-14-14

7-12-14

14020453870



SEN PATCH



SEN PATCH

14020453871