



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20461

THIS IS THE BEGINNING OF MUR # 3479

DATE FILMED 10/27/93 CAMERA NO. 2

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FEDERAL ELECTION COMMISSION

MUR 3479

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OFFICE OF CHIEF COUNSEL
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II.

COMPLAINT - Page 1

III.

JURISDICTION AND VENUE

3. The Federal Election Commission has jurisdiction over enforcement of Federal Election Campaign laws pursuant to 2 U.S.C. Sec. 437c.(b)(1).

4. Venue is proper before the Federal Election Commission pursuant to 2 U.S.C. sec. 437g.(a)(1) and 11 C.F.R. 111.

IV.

FACTS

5. Lipinski has been a member of the United States House of Representatives since 1983. Previously, Lipinski served as Chicago City Council Alderman for the 23rd Ward. He continues to serve as the Democratic Party Committeeman for the 23rd Ward.

6. As Congressman and Ward Committeeman, Lipinski has access to various bank accounts that were originated to fund his federal re-election and 23rd Ward political activities.

7. "Friends of Lipinski I, a division of Lipinski For Congress" is one such bank account; it is maintained at the Evergreen Bank/Clearing Bank of Chicago, Illinois.

8. Lipinski has used this bank account to pay for federal campaign related transactions.¹

¹See Exhibits 1A and 1B. For example: Lipinski's FEC Disbursement Reports indicate a disbursement on February 13, 1990 to a Mr. Walter Troy from Lipinski's FEC - disclosed account. See Exhibits 1A. The actual check to Troy, however, is drawn on "Friends of Lipinski I" -- an account that has never been registered with the FEC. See Exhibit 1B. This disbursement thus raises questions as to which fund was actually used to pay Troy and the relationship between the disclosed and undisclosed federal accounts.

**APPARENTLY UNLAWFUL USE OF
FUNDS FROM UNDECLARED BANK ACCOUNT**

9. Russo re-alleges and incorporates by reference paragraphs 1 through 10.

10. The Federal Election Commission Statement of Organization requires the disclosure of all banks and depositories in which a campaign committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds².

11. "Friends of Lipinski I" is an account at Evergreen Bank/Clearing Bank in which Lipinski, or his campaign committee, deposits funds, holds accounts, or maintains funds.

12. Neither Lipinski nor his campaign committee have ever listed an account at Evergreen Bank/Clearing Bank.³ Neither is this account registered with the State of Illinois.

13. Maintenance and use of this undisclosed account by the Lipinski for Congress Committee is in violation of federal law and raises serious legal and ethical concerns about Lipinski's reelection campaign.⁴

²U.S.C. Sec. 433(b)(6) requires "a listing of all banks, safety deposit boxes or other depositories used by the committee." Additionally, 2 U.S.C. Sec. 433(c) states that "any change in information previously submitted in a statement of organization shall be reported no later than 10 days after the date of the change."

³~~See~~ Exhibits 2-4 (failing to list the Evergreen Bank/Clearing Bank account).

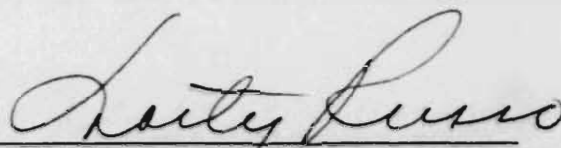
⁴~~See~~ 2 U.S.C. 432(h)(1). "No disbursements may be made . . . by such committee except by check drawn on such account in accordance with this section."

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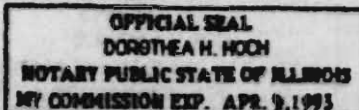
14. Lipinski continues to operate his reelection campaign in an apparently unlawful and unethical manner.⁵ It is clear that Lipinski intends that any irregularities will escape this commission's attention, thereby providing him a clear, but seemingly illegal path to reelection.

PRAYER FOR RELIEF

In light of the foregoing, Russo respectfully requests the Federal Election Commission to investigate and cause to be rectified the above-mentioned violations of the Federal Election Campaign laws.


Congressman Marty Russo

SUBSCRIBED AND SWORN TO
BEFORE ME THIS 28th DAY
OF FEBRUARY, 1992.




Notary Public

My commission expires:

April 9, 1993

CJHB/30

⁵Illustrative of the improper and undisclosed character of this account is a \$1,000 contribution from "Friends of Lipinski I" to a 23rd Ward account. See Exhibit 5. Yet, there is no record of a corresponding disbursement from Lipinski's FEC-declared account to the 23rd Ward. See Exhibit 6 (complete schedule of Lipinski's FEC disbursements for relevant period which shows no corresponding \$1,000 disbursement). Where is the money coming from?

①

Supplemental Form (Continuation of Form 1041)

A. Add Name, Address and ZIP Code	Purpose of Distribution	Date Received (M, D, Y)	Amount of Each Distribution This Period
Robert T. Trow 202 W. Main Avenue Lafayette Park, IL	Returned Money Distribution to <input checked="" type="checkbox"/> Partner <input type="checkbox"/> Other <input type="checkbox"/> Other (Specify)	2/22/92	1,750.00
B. Add Name, Address and ZIP Code	Purpose of Distribution Distribution to <input type="checkbox"/> Partner <input type="checkbox"/> Other <input type="checkbox"/> Other (Specify)	Date Received (M, D, Y)	Amount of Each Distribution This Period
C. Add Name, Address and ZIP Code	Purpose of Distribution Distribution to <input type="checkbox"/> Partner <input type="checkbox"/> Other <input type="checkbox"/> Other (Specify)	Date Received (M, D, Y)	Amount of Each Distribution This Period
D. Add Name, Address and ZIP Code	Purpose of Distribution Distribution to <input type="checkbox"/> Partner <input type="checkbox"/> Other <input type="checkbox"/> Other (Specify)	Date Received (M, D, Y)	Amount of Each Distribution This Period
E. Add Name, Address and ZIP Code	Purpose of Distribution Distribution to <input type="checkbox"/> Partner <input type="checkbox"/> Other <input type="checkbox"/> Other (Specify)	Date Received (M, D, Y)	Amount of Each Distribution This Period
F. Add Name, Address and ZIP Code	Purpose of Distribution Distribution to <input type="checkbox"/> Partner <input type="checkbox"/> Other <input type="checkbox"/> Other (Specify)	Date Received (M, D, Y)	Amount of Each Distribution This Period
G. Add Name, Address and ZIP Code	Purpose of Distribution Distribution to <input type="checkbox"/> Partner <input type="checkbox"/> Other <input type="checkbox"/> Other (Specify)	Date Received (M, D, Y)	Amount of Each Distribution This Period
H. Add Name, Address and ZIP Code	Purpose of Distribution Distribution to <input type="checkbox"/> Partner <input type="checkbox"/> Other <input type="checkbox"/> Other (Specify)	Date Received (M, D, Y)	Amount of Each Distribution This Period
I. Add Name, Address and ZIP Code	Purpose of Distribution Distribution to <input type="checkbox"/> Partner <input type="checkbox"/> Other <input type="checkbox"/> Other (Specify)	Date Received (M, D, Y)	Amount of Each Distribution This Period
TOTAL of Distributions This Page Reported			
TOTAL This Period (Enter only the number only)			1750.00

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Exhibit No. 4112

EXHIBIT

1A

254

FRIENDS OF LIPINSKI
DIVISION OF LIPINSKI FOR CONGRESS
1436 ARCHER AVE
CHICAGO, ILL 60638

FEBRUARY 13 1970

1-271
7-0

\$ 1,250.00

PAY
TO THE
ORDER OF

WALTER TROY

One Thousand Two Hundred Fifty

20

1.00

DOLLARS

Clearing Bank

EVEINGREEN
BANKS

SECTION Campaign Laws

00002547 00760027601 32-369410

John Mooney

EXHIBIT

1B

WILLIAM D. LIPINSKI
U.S. HOUSE OF REPRESENTATIVES

WASHINGTON, D.C. 20515
TELEPHONE (202) 225-6000
FAX (202) 225-6001

OFFICE
1000 CONGRESS DRIVE, SUITE 200
WASHINGTON, D.C. 20540
PHONE (202) 225-6000
FAX (202) 225-6001

Congress of the United States
House of Representatives
Washington, DC 20515

February 11, 1990

Walter Troy
102 North Malden
La Grange, Illinois 60525

Dear Mr. Troy:

Your generous contribution of \$1,250.00 for Congressman William D. Lipinski's last fundraiser was deposited into the wrong account by mistake. Therefore we are required by federal election campaign laws to withdraw the money from this account and return the contribution to you.

Enclosed please find a check in the amount of \$1,250.00.

We deeply appreciate your continued support to Congressman Lipinski's campaign and apologize for any inconvenience this matter has caused you.

With kindest personal regards, I remain,

Very truly yours,

John T. Mooney

John T. Mooney
Treasurer
Lipinski for Congress Committee

Enclosure

REGULAR MAIL
FEB 10 1990

STATEMENT OF ORGANIZATION

See reverse side for instructions

DO NOT WRITE IN THESE SPACES

1. (a) Name of Committee (in Full) Lipinski for Congress Committee
(b) Address (Number or Street)
6242 W. 59th Street
(c) City, State and ZIP Code
Chicago, IL 60638

2. (a) Check if name or address is changed.
(b) Committee Number
098167
(c) Is this an amended statement? YES ☐ NO ☒

3. TYPE OF COMMITTEE (check one)

- ☒ (a) This committee is a principal campaign committee. (Complete the candidate information below.)
☐ (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- William Q. Lipinski Democrat U.S. House Illinois/07
Name of Candidate Candidate Party Affiliation Office Sought State/District
- ☐ (c) This committee supports/advocates only one candidate. (Name of candidate) _____ and is NOT an authorized committee.
☐ (d) This committee is a _____ (National, State or subordinate) committee of the _____ Party.
(Democrat, Republican, etc.)
☐ (e) This committee is a separate segregated fund.
☐ (f) This committee supports/advocates more than one Federal candidate and is NOT a separate segregated fund nor a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
None		

If the reporting political committee has identified a "connected organization" above, please indicate type of organization:

- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

7. Custodian of Records Identify by name, address (phone number - optional) and position, the person in possession of committee books and records.

Full Name	Mailing Address and ZIP Code	Title or Position
John Mooney	6242 W. 59th Street, Chicago, IL 60638	Treasurer
8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee, and the name and address of any designated agent (e.g., assistant treasurer).		
Full Name	Mailing Address and ZIP Code	Title or Position
John Mooney	6242 W. 59th Street, Chicago, IL 60638	Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
American National Bank, LaSalle & Washington, Chicago, IL 60690	

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

John Mooney John Mooney 1/18/89
Type or Print Name of Treasurer SIGNATURE OF TREASURER Date

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

For further information contact: Federal Election Commission, Toll Free 800-424-9530, Local 202-673-4888

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FEC FORM 1 (2/80)

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REGULAR MAIL

NOV 12 1991

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

LIPINSKI FOR CONGRESS COMMITTEE
6242 W. 59th STREET
CHICAGO, IL 60638

DATE
NOVEMBER 11, 1991
098167

1. TYPE OF COMMITTEE (check one)

- ☒ (a) This committee is a pre-primary campaign committee. (If complete the candidate information below.)
- (b) This committee is an author/petition committee, and is NOT a pre-primary campaign committee. (Complete the candidate information below.)
- Name of Candidate: **WILLIAM O. LIPINSKI** Candidate Party Affiliation: **DEMOCRATIC** Office Sought: **U.S. HOUSE** State/District: **IL/3rd**
- (c) This committee supports/opposes only one candidate. (Name of candidate) _____ and is NOT an authorized committee.
- (d) This committee is a _____ committee of the _____ Party. (National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one federal candidate, and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization: Corporation, Corporation w/o Capital Stock, Labor Organization, Membership Organization, Trade Association, Cooperative

7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
JOHN MOONEY	6242 W. 59th STREET CHICAGO, IL 60638	TREASURER

8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee, and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
JOHN MOONEY	6242 W. 59th STREET CHICAGO, IL 60638	TREASURER

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
AMERICAN NATIONAL BANK	1836 N. BROADWAY MELROSE PARK, IL 60160

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

TYPE OR PRINT NAME OF TREASURER	SIGNATURE OF TREASURER	DATE
JOHN MOONEY	<i>John T. Mooney</i>	11-11-91

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 4370. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact
Federal Election Commission
Toll free 800 424 9570
Local 202 376 3120

FEC FORM 1
(revised 4/87)

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JUL 24 1989

23RD WARD DEMOCRATIC ORGANIZATION
SCHEDULE A - RECEIPTS
P A R T 3
FROM 7-1-88 THROUGH 6-30-89

STATE BOARD OF ELECTIONS

NAME AND ADDRESS	DATE	AMOUNT	AGGREGATE AMOUNT
Sophie Pfister 5736 S. Merrimac Chicago, IL 60638	9-2-88	800.00	800.00
Friends of Lipinski I 5838 Archer Avenue Chciago, IL 60638	10-11-88	1,000.00	1,000.00
Krystyniak for the Senate 5838 Archer Avenue Chicago, IL 60638	11-15-88	1,000.00	1,000.00
Lipinski for Congress Committee 6242 W. 59th Street Chicago, IL 60638	5-8-89	5,000.00	5,000.00
GRAND TOTAL		7,800.00	7,800.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

(See instructions attached to the Schedule Summary Page for each category of the Schedule Summary Page)

PAGE LINE NUMBER
17

Any information copied from each Report and Statement may not be sold or used by any person for the purpose of soliciting contributions or for promotional purposes, other than using the name and address of any individual contributor to solicit contributions from such contributor.

NAME OF COMMITTEE (in Full)

LEPINSKI FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Midway Airlines	Purpose of Disbursement Midway Airlines Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-10-88	Amount of Each Disbursement This Period 198.00
B. Full Name, Mailing Address and ZIP Code Midway Airlines	Purpose of Disbursement Airline Ticket Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-15-88	Amount of Each Disbursement This Period 451.37
C. Full Name, Mailing Address and ZIP Code Bishop's Anniversary Committee 4327 S. Richmond Street Chicago, IL 60632	Purpose of Disbursement Dinner and Ads Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-18-88	Amount of Each Disbursement This Period 450.00
D. Full Name, Mailing Address and ZIP Code Central Printers 5109 W. 63rd Street Chicago, IL 60638	Purpose of Disbursement Test. Driver Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-14-88	Amount of Each Disbursement This Period 260.60
E. Full Name, Mailing Address and ZIP Code Central Printers 6109 W. 63rd Street Chicago, IL 60638	Purpose of Disbursement Lettering, 14, 12 IV. Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-9-88	Amount of Each Disbursement This Period 169.20
F. Full Name, Mailing Address and ZIP Code Central Printers 6169 W. 63rd Street Chicago, IL 60638	Purpose of Disbursement Business Cards Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-15-88	Amount of Each Disbursement This Period 258.00
G. Full Name, Mailing Address and ZIP Code Central Printers 6169 W. 63rd Street Chicago, IL 60638	Purpose of Disbursement Envelope/Letter Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-23-88	Amount of Each Disbursement This Period 142.60
H. Full Name, Mailing Address and ZIP Code Clear Ridge Baseball 6135 S. New England Chicago, IL 60638	Purpose of Disbursement Donation Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-1-88	Amount of Each Disbursement This Period 200.00
I. Full Name, Mailing Address and ZIP Code Cycle Printers	Purpose of Disbursement Parade Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-1-88	Amount of Each Disbursement This Period 38.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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OFFICE OF CLERICAL COUNSEL

SCHEDULE B

FINANCED DISBURSEMENTS

For each committee of the
Detailed Summary Page

FOR LINE NUMBER

17

Any information supplied from such Reports and Disbursements 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 individual mentioned as such a contributor from such committee

NAME OF COMMITTEE (in Full)

LIPIDINI FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cycle Printers 5866 Archer Chicago, IL 60638	Questionnaire/L Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-22-88	96.00
B. Full Name, Mailing Address and ZIP Code Cycle Printers 5866 Archer Chicago, IL 60638	Purpose of Disbursement Mask Shop COSTO Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-14-88	180.00
C. Full Name, Mailing Address and ZIP Code David R. Rudejko Roxbury Rayburn Bldg. Washington, D.C.	Purpose of Disbursement Envelopes Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-22-88	662.50
D. Full Name, Mailing Address and ZIP Code DINO. BAKER & SERRATE COUNCIL 430 S. Capitol Street Washington, DC 20003	Purpose of Disbursement D. Fundraiser Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-15-88	735.30
E. Full Name, Mailing Address and ZIP Code Dennis C. Vandy & Co., Ltd. 115 W. Oak Park Avenue Oak Park, IL 60301	Purpose of Disbursement Professional St. Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-17-88	1,040.00
F. Full Name, Mailing Address and ZIP Code Illinois Delegation Washington, DC	Purpose of Disbursement Laboratory Fund H Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-14-88	50.00
G. Full Name, Mailing Address and ZIP Code National Assoc. Club 30 Ivy Street Washington, IL 20003	Purpose of Disbursement Banquet Charge Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-18-88	551.43
H. Full Name, Mailing Address and ZIP Code Peter Blasco 5838 S. Archer Chicago, IL 60638	Purpose of Disbursement Political Activ. Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-1-88	500.00
I. Full Name, Mailing Address and ZIP Code Picture This 5200 S. Pulaski Road Chicago, IL 60632	Purpose of Disbursement Film Polaroids Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-9-88	179.04

SUBTOTAL of Disbursements This Page (amount)

TOTAL This Period (see page 10 for instructions)

SCHEDULE B

ITEMIZED DISBURSEMENTS

See instructions on back of this page for each category of the Detailed Summary Page

FOR LINE NUMBER

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

NAME OF COMMITTEE OR FULL

REPORT FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Chicago Title 5200 S. Pulaski Road Chicago, IL 60632	Purpose of Disbursement Photographic MU Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-8-88	Amount of Each Disbursement This Period 30.35
B. Full Name, Mailing Address and ZIP Code Katie Post 2729 5658 Archer Avenue Chicago, IL 60638	Purpose of Disbursement Public Donation Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-19-88	Amount of Each Disbursement This Period 50.00
C. Full Name, Mailing Address and ZIP Code Saint Stephen's Parish 6125 S. Austin Chicago, IL 60638	Purpose of Disbursement Donation Ticket Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-18-88	Amount of Each Disbursement This Period 20.00
D. Full Name, Mailing Address and ZIP Code Santo Sports Store 4240 S. Archer Avenue Chicago, IL 60632	Purpose of Disbursement Jackets All New Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-19-88	Amount of Each Disbursement This Period 654.93
E. Full Name, Mailing Address and ZIP Code Santo Sports Store 4240 S. Archer Avenue Chicago, IL 60632	Purpose of Disbursement Playoffs Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-14-88	Amount of Each Disbursement This Period 9.05
F. Full Name, Mailing Address and ZIP Code Scola Specialty Advertising Co. 8917 N. Oakmont Road North Riverside, IL	Purpose of Disbursement Label Glassy M Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-1-88	Amount of Each Disbursement This Period 355.66
G. Full Name, Mailing Address and ZIP Code Standard Federal 6141 S. Archer Chicago, IL 60638	Purpose of Disbursement Bund Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-26-88	Amount of Each Disbursement This Period 300.00
H. Full Name, Mailing Address and ZIP Code Standard Federal 6141 S. Archer Chicago, IL 60638	Purpose of Disbursement bund Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-26-88	Amount of Each Disbursement This Period 50.00
I. Full Name, Mailing Address and ZIP Code Terry Benzlinski 5838 Archer Chicago, IL 60638	Purpose of Disbursement Office Supplies Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-30-88	Amount of Each Disbursement This Period 136.55

Sub TOTAL of Disbursements This Page (page 1 of 1)

TOTAL This Period (all pages this Schedule B only)

93040983015

SCHEDULE B

ITEMIZED DISBURSEMENTS

See instructions on page 4 for each category of disbursement. Summarize Page

4 1 5
FBI LA 88-1111111
27

Any information copied from such Reports and Disbursements may not be sold or used by any person for the purpose of collecting contributions or for any commercial purpose, other than selling the name and address of any political committee to collect contributions from such contributors.

NAME OF COMMITTEE in Full

LIFESIZE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code The Museum of Broadcast Comm. 810 S. Wells Street Chicago, IL 60607	Purpose of Disbursement Paul Harvey Dir. Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-16-88	Amount of Each Disbursement This Period 750.00
B. Full Name, Mailing Address and ZIP Code The Museum of Broadcast Comm. 810 S. Wells Street Chicago, IL 60607	Purpose of Disbursement Paul Harvey Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-16-88	Amount of Each Disbursement This Period 200.00
C. Full Name, Mailing Address and ZIP Code The Peoples Economy Party 4162 Elm Avenue Chicago, IL 60673	Purpose of Disbursement Cocktails Party Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-27-88	Amount of Each Disbursement This Period 75.00
D. Full Name, Mailing Address and ZIP Code V.F.W. Shrine Post 82729 5806 Archer Avenue Chicago, IL 60638	Purpose of Disbursement Duration Annual Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8-30-88	Amount of Each Disbursement This Period 25.00
E. Full Name, Mailing Address and ZIP Code Nelly Pula 5653 S. LaClair Chicago, IL 60638	Purpose of Disbursement Birthday Gift Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-22-89	Amount of Each Disbursement This Period 20.00
F. Full Name, Mailing Address and ZIP Code Walter Ratz 6035 S. Meade Chicago, IL 60638	Purpose of Disbursement Political Activ. Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-31-88	Amount of Each Disbursement This Period 300.00
G. Full Name, Mailing Address and ZIP Code Walter Ratz 6035 S. Meade Chicago, IL 60638	Purpose of Disbursement Political Activ. Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-1-88	Amount of Each Disbursement This Period 300.00
H. Full Name, Mailing Address and ZIP Code Walter Pula 6035 S. Meade Chicago, IL 60638	Purpose of Disbursement Political Activ. Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-31-88	Amount of Each Disbursement This Period 250.00
I. Full Name, Mailing Address and ZIP Code Walter Pula 5653 S. LaClair Chicago, IL	Purpose of Disbursement Political Work Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-26-88	Amount of Each Disbursement This Period 250.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

93040983016

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate sheets for each category of the Detailed Summary Page

Page 1 of 1
27

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 person authorized to solicit contributions from such committee.

Name of Committee (in Full)

REFUGEE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code William O. Ipiński	Purpose of Disbursement CASHIATION EXP Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General (Under Item 1)	Date (month, day, year) 7-18-88	Amount of Each Disbursement This Period XXX (X)
B. Full Name, Mailing Address and ZIP Code William O. Ipiński	Purpose of Disbursement Tide Expeditions Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General (Under Item 1)	Date (month, day, year) 7-1-88	Amount of Each Disbursement This Period 200.00
C. Full Name, Mailing Address and ZIP Code William O. Ipiński	Purpose of Disbursement Roundall Corp Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General (Under Item 1)	Date (month, day, year) 6-25-88	Amount of Each Disbursement This Period 120.00
D. Full Name, Mailing Address and ZIP Code William O. Ipiński	Purpose of Disbursement Caj. Gas for Ray Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General (Under Item 1)	Date (month, day, year) 6-25-88	Amount of Each Disbursement This Period 20.00
E. Full Name, Mailing Address and ZIP Code William O. Ipiński	Purpose of Disbursement Tickets (airfare) Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General (Under Item 1)	Date (month, day, year) 6-29-88	Amount of Each Disbursement This Period 50.00
F. Full Name, Mailing Address and ZIP Code William O. Ipiński	Purpose of Disbursement Lodging (airfare) Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General (Under Item 1)	Date (month, day, year) 6-29-88	Amount of Each Disbursement This Period 25.00
G. Full Name, Mailing Address and ZIP Code Silver Star Printing 2837 S. Harlem Chicago 9330, IL	Purpose of Disbursement Printing Material Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General (Under Item 1)	Date (month, day, year) 9-28-88	Amount of Each Disbursement This Period 762.50
H. Full Name, Mailing Address and ZIP Code Miscellaneous Disbursements Under \$200.00 in Aggregate	Purpose of Disbursement Miscellaneous Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General (Under Item 1)	Date (month, day, year) 9-28-88	Amount of Each Disbursement This Period 5,034.01
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (page 1 of 1)

TOTAL This Period (last page this line number only)

14,609.00

23040983017

ITEMIZED DISBURSEMENTS

Page 1 of 1
Last updated: 11/11/21
This document is not for
distribution outside the
Department of the
Treasury

[illegible]

A. Full Name, Mailing Address and ZIP Code	Purpose of Contribution	Date Received	Amount of Each Contribution This Period
14th Ward Regular Debut. Organization 2056 W. 51st Chicago, IL 60632	Discretionary for Primary Member (See Receipt)	8/9/68	200.00
B. Full Name, Mailing Address and ZIP Code Citizens for O'Connell 6695 S. Archer, Unit 20 Willard Springs, IL 60558	Purpose of Contribution Contribution	Date Received	Amount of Each Contribution This Period
	Disbursement for Primary Member (See Receipt)	9/9/68	1,000.00
C. Full Name, Mailing Address and ZIP Code Citizens for O'Connell 6695 S. Archer, Unit 20 Willard Springs, IL 60558	Purpose of Contribution Permit. Cam. for Signet and Literature	Date Received	Amount of Each Contribution This Period
	Disbursement for Primary Member (See Receipt)	9/9/68	2,472.30
D. Full Name, Mailing Address and ZIP Code Democratic Circle 218 N. Jefferson Street Chicago, IL 60646	Purpose of Contribution Discretionary	Date Received	Amount of Each Contribution This Period
	Disbursement for Primary Member (See Receipt)	8/15/68	35.00
E. Full Name, Mailing Address and ZIP Code IL Pro. Life Coalition PAC P.O. Box 643 Oak Park, IL 60302	Purpose of Contribution All bank	Date Received	Amount of Each Contribution This Period
	Disbursement for Primary Member (See Receipt)	8/15/68	200.00
F. Full Name, Mailing Address and ZIP Code Felix Township Leas. Org. 131 S. Southwest Highway Felix, IL	Purpose of Contribution Cocktail招待会	Date Received	Amount of Each Contribution This Period
	Disbursement for Primary Member (See Receipt)	7/18/68	70.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Contribution	Date Received	Amount of Each Contribution This Period
	Disbursement for Primary Member (See Receipt)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Contribution	Date Received	Amount of Each Contribution This Period
	Disbursement for Primary Member (See Receipt)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Contribution	Date Received	Amount of Each Contribution This Period
	Disbursement for Primary Member (See Receipt)		
SUBTOTAL of Contributions This Period (continued)			
TOTAL This Period (last page has line number 50)			63,677.30

EXHIBIT 2
(Form 2000)

LOANS
(ONED TO EXHIBIT 2)

Page 1 of 1
Use correct schedule
for each numbered item

93040983019

Name of Institution (or Pool)		Original Amount of Loan	Commissions Payment To Date	Balance Outstanding at Close of This Period
Lipinski For Congress Committee A. Full Name, Mailing Address and ZIP Code of Loan Source Krystyniak For the Senate 5635 Archer Avenue Chicago, IL 60638		1,000.00	0.00	1,000.00
B. Section C. Primary B. General C. Other (Specify): Terms: Date Incurred 2-26-88 Date Due None Interest Rate None Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
B. Full Name, Mailing Address and ZIP Code of Loan Source		Original Amount of Loan	Commissions Payment To Date	Balance Outstanding at Close of This Period
Krystyniak For the Senate 5635 Archer Avenue Chicago, IL 60638		1,000.00	0.00	1,000.00
B. Section C. Primary B. General C. Other (Specify): Terms: Date Incurred 2-4-88 Date Due None Interest Rate None Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding		
SUBTOTALS This Period This Page (omit)				
TOTALS This Period (fill page in the box only)				
Carry outstanding balance only to LINE 2, Schedule D, for this line. If no Schedule D carry forward to appropriate line of Summary.				

LOANS LOANED TO COMMITTEES

See instructions on back of this form for each published issue.

Name of Committee or Sub-Committee		Original Amount of Loan	Cumulative Payments To Date	Balance Outstanding at Close of This Period												
Lipinski For Congress Committee A Full Name, Mailing Address and ZIP Code of Loan Source Friends of Lipinski II 5038 Archer Avenue Chicago, IL 60638		1,000.00	0.00	1,000.00												
Section: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Other (specify) _____ Terms: Date loaned 4-15-68 Date due NONE Interest Rate None Secured <input type="checkbox"/>		Let All Endorsers or Guarantors list first to item A <table border="1"> <thead> <tr> <th>1 Full Name, Mailing Address and ZIP Code</th> <th>Name of Employer</th> <th>Occupation</th> <th>Amount Guaranteed Outstanding</th> </tr> </thead> <tbody> <tr> <td>2 Full Name, Mailing Address and ZIP Code</td> <td>Name of Employer</td> <td>Occupation</td> <td>Amount Guaranteed Outstanding</td> </tr> <tr> <td>3 Full Name, Mailing Address and ZIP Code</td> <td>Name of Employer</td> <td>Occupation</td> <td>Amount Guaranteed Outstanding</td> </tr> </tbody> </table>			1 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding	2 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding	3 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding
1 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding													
2 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding													
3 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding													
B Full Name, Mailing Address and ZIP Code of Loan Source Friends of Lipinski II 5038 Archer Avenue Chicago, IL 60638		1,000.00	0.00	1,000.00												
Section: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Other (specify) _____ Terms: Date loaned 4-15-68 Date due NONE Interest Rate None Secured <input type="checkbox"/>		Let All Endorsers or Guarantors list first to item B <table border="1"> <thead> <tr> <th>1 Full Name, Mailing Address and ZIP Code</th> <th>Name of Employer</th> <th>Occupation</th> <th>Amount Guaranteed Outstanding</th> </tr> </thead> <tbody> <tr> <td>2 Full Name, Mailing Address and ZIP Code</td> <td>Name of Employer</td> <td>Occupation</td> <th>Amount Guaranteed Outstanding</th> </tr> <tr> <td>3 Full Name, Mailing Address and ZIP Code</td> <td>Name of Employer</td> <td>Occupation</td> <th>Amount Guaranteed Outstanding</th> </tr> </tbody> </table>			1 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding	2 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding	3 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding
1 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding													
2 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding													
3 Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Amount Guaranteed Outstanding													
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this and only) Carry outstanding balance only to Line 2, Schedule D, for this time. If no Schedule D, carry forward to appropriate line of Summary																

93040983020

Revised 2-88

LOANS
(USED TO COMPLETE)

Do not check this box unless you are reporting a loan to a credit reporting agency.

Name of Committee for Part I Lipinski For Congress Committee			
A Full Name, Mailing Address and ZIP Code of Loan Source Friends of Lipinski II 5638 Archer Avenue Chicago, IL 60638		Original Amount of Loan 1,000.00	Committed Payments To Date 0.00
B Section 179(e) <input type="checkbox"/> Section 179 <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Balance Outstanding at Close of This Period 1,000.00	
Terms Date Incurred 5-2-88 Date Due NONE Interest Rate NONE (specify)		C Secured <input type="checkbox"/>	
List All Endorsers or Guarantors (if any) to Item A			
1 Full Name, Mailing Address and ZIP Code		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding \$	
		Name of Employer	
2 Full Name, Mailing Address and ZIP Code		Occupation	
		Amount Guaranteed Outstanding \$	
		Name of Employer	
		Occupation	
3 Full Name, Mailing Address and ZIP Code		Amount Guaranteed Outstanding \$	
		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding \$	
D Full Name, Mailing Address and ZIP Code of Loan Source Krystyniak for Senate 5638 Archer Avenue Chicago, IL 60638		Original Amount of Loan 500.00	Committed Payments To Date 0.00
E Section 179(e) <input type="checkbox"/> Section 179 <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Balance Outstanding at Close of This Period 500.00	
Terms Date Incurred 5-6-88 Date Due NONE Interest Rate NONE (specify)		F Secured <input type="checkbox"/>	
List All Endorsers or Guarantors (if any) to Item D			
1 Full Name, Mailing Address and ZIP Code		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding \$	
		Name of Employer	
2 Full Name, Mailing Address and ZIP Code		Occupation	
		Amount Guaranteed Outstanding \$	
		Name of Employer	
		Occupation	
3 Full Name, Mailing Address and ZIP Code		Amount Guaranteed Outstanding \$	
		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding \$	
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this form only)			
Carry outstanding balance only to LHO 2 Schedule B for this loan. If no Schedule B, carry forward to appropriate end of Summary.			

93040983021

OMB No. 1545-0047

**LOANS
(USED TO CONSUME)**

Use separate schedule
for each numbered item

Name of Committee or Fund Lipinski For Congress Committee			
A. Full Name, Mailing Address and ZIP Code of Loan Source Kryszewski for Senate 5838 Archer Avenue Chicago, IL 60638		Original Amount of Loan 500.00	Balance Outstanding at Close of This Period 500.00
Emission <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Terms: 5-6-85 Date Due: None Interest Rate: None <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding	
		Name of Employer	
2. Full Name, Mailing Address and ZIP Code		Occupation	
		Amount Guaranteed Outstanding	
		Name of Employer	
		Occupation	
3. Full Name, Mailing Address and ZIP Code		Amount Guaranteed Outstanding	
		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding	
B. Full Name, Mailing Address and ZIP Code of Loan Source		Original Amount of Loan	Balance Outstanding at Close of This Period
Emission <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: _____ Date Due: _____ Interest Rate: _____ <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding	
		Name of Employer	
2. Full Name, Mailing Address and ZIP Code		Occupation	
		Amount Guaranteed Outstanding	
		Name of Employer	
		Occupation	
3. Full Name, Mailing Address and ZIP Code		Amount Guaranteed Outstanding	
		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding	
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to L, Part 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

DISBURSEMENTS

DISBURSEMENTS

Use separate worksheets for each category of the following disbursements:

PAGE 1 OF 2
FOR LINE NUMBER 17

Any information reported from such Reports and Disbursements may not be used by any person for the purpose of obtaining contributions or for commercial purposes, other than using the name and address of any public official to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

LEDRISK FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Malley, F. Lee 6035 Meade Chicago, IL 60638	Purpose of Disbursement Political Activities Disbursement for: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> (Other category)	Date (month day, year) 10/18/88	Amount of Each Disbursement This Period 50.00
B. Full Name, Mailing Address and ZIP Code The Mayfield Inc. 6074 S. Archer Chicago, IL 60638	Purpose of Disbursement Dinner Dance for ^{for} General ^{General} Disbursement for: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> (Other category)	Date (month day, year) 10/14/88	Amount of Each Disbursement This Period 2,223.00
C. Full Name, Mailing Address and ZIP Code 23rd Ward Reg. Demo. Org. 5838 Archer Avenue Chicago, IL 60620	Purpose of Disbursement Political Activities for Disbursement for: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> (Other category)	Date (month day, year) 10/19/88	Amount of Each Disbursement This Period 333.33
D. Full Name, Mailing Address and ZIP Code 23rd Ward Reg. Demo. Org. 5838 S. Archer Chicago, IL 60638	Purpose of Disbursement Payment for loan for stamps Disbursement for: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> (Other category)	Date (month day, year) 10/18/88	Amount of Each Disbursement This Period 333.33
E. Full Name, Mailing Address and ZIP Code Vandana Pab Chicago, IL	Purpose of Disbursement Alo for telephone Disbursement for: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> (Other category)	Date (month day, year) 10/14/88	Amount of Each Disbursement This Period 305.00
F. Full Name, Mailing Address and ZIP Code Illinois Bell Bill Payment Center Chicago, IL 60663	Purpose of Disbursement Telephone Bill Disbursement for: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> (Other category)	Date (month day, year) 10/17/88	Amount of Each Disbursement This Period 175.30
G. Full Name, Mailing Address and ZIP Code Jana Ruzdun 31 Bayshore River Forest, IL 60305	Purpose of Disbursement Radio Disbursement for: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> (Other category)	Date (month day, year) 10/12/88	Amount of Each Disbursement This Period 4,025.00
H. Full Name, Mailing Address and ZIP Code Uhar Heights Civic Association 4059 W. 47th St., Suite 84 Chicago, IL 60632	Purpose of Disbursement Dinner Dance Ticket Disbursement for: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> (Other category)	Date (month day, year) 10/12/88	Amount of Each Disbursement This Period 225.00
I. Full Name, Mailing Address and ZIP Code Picture This 5270 S. Pulaski Road Chicago, IL 60632	Purpose of Disbursement Photographic Work for the Month of Sept. 1988 Disbursement for: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> (Other category)	Date (month day, year) 10/10/88	Amount of Each Disbursement This Period 109.87

SUBTOTAL of Disbursements This Page (top line)

TOTAL This Period (sum page this into number 17)

17-1874

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Budget Summary Page

Page **2**
FOR LINE NUMBER
17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of collecting 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)

LIPINSKI FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code MARION J. LIPINSKI, 11500 1st Avenue, Suite 200, New York, NY 10022	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General (Other specify)	Date (month, day, year)	Amount of Each Disbursement This Period 1,410.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General (Other specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General (Other specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General (Other specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General (Other specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General (Other specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General (Other specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General (Other specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General (Other specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (continued)

TOTAL This Period (last page of this number only)

9,684.83

93040983024

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use amounts calculated for each category of the Detailed Summary page

Page 1 of 1
FOR LINE NUMBER 21

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

NAME OF COMMITTEE (in Full)

LIPINSKI FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Illinois Division PAC 5849 N. Milwaukee Avenue Chicago, IL 60646	Purpose of Disbursement Heritage Dinner Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/10/88	Amount of Each Disbursement This Period 400.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (top of page)

TOTAL This Period (last page (the line number 21))

400.00

93040983025

13601870

OMB No. 1545-0047

LOANS

(Check to Committee)

Do not check this box for
Loans to individuals
that are not guaranteed
for each category (see)

Name of Committee (in Full) LIPINSKI FOR CONGRESS COMMITTEE			
A Full Name, Mailing Address and ZIP Code of Loan Recipient Krystyniak For the Senate 9838 Archer Avenue Chicago, IL 60638		Original Amount of Loan 1,000.00	Cumulative Payments To Date 1,000.00
Balance Outstanding at Close of This Period 0.00		Interest Rate NONE Secured	
Let me know if you are a guarantor of a loan from A			
1 Full Name, Mailing Address and ZIP Code 		Name of Employer 	
2 Full Name, Mailing Address and ZIP Code 		Name of Employer 	
3 Full Name, Mailing Address and ZIP Code 		Name of Employer 	
B Full Name, Mailing Address and ZIP Code of Loan Recipient Krystyniak For the Senate 9838 Archer Avenue Chicago, IL 60638		Original Amount of Loan 1,000.00	Cumulative Payments To Date 1,000.00
Balance Outstanding at Close of This Period 0.00		Interest Rate NONE Secured	
Let me know if you are a guarantor of a loan from B			
1 Full Name, Mailing Address and ZIP Code 		Name of Employer 	
2 Full Name, Mailing Address and ZIP Code 		Name of Employer 	
3 Full Name, Mailing Address and ZIP Code 		Name of Employer 	
SUBTOTALS This Period This Page Subtotals:			
TOTALS This Period See page in this booklet			
Carry a remaining balance only to LINE 9, Schedule D, for this line. If on Schedule D, carry forward to appropriate line of Summary.			

13601877

(USE TO COMPLETE)

Name of Contributor (in Full)			
LIPINSKI FOR CONGRESS COMMITTEE			
A Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Contributions Payable To Date	Balance Outstanding at Close of This Period
Friends of Lipinski II 5838 Archer Avenue Chicago, IL 60638	1,000.00	1,000.00	0.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Terms: Loan incurred: 4-15-88 Date Due: NONE Interest Rate: NONE (specify) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors of this loan (see item A)			
1 Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding		
	Name of Employer		
2 Full Name, Mailing Address and ZIP Code	Occupation		
	Amount Guaranteed Outstanding		
	Name of Employer		
3 Full Name, Mailing Address and ZIP Code	Occupation		
	Amount Guaranteed Outstanding		
	Name of Employer		
B Full Name, Mailing Address and ZIP Code of Loan Source			
Friends of Lipinski II 5838 Archer Avenue Chicago, IL 60638	Original Amount of Loan	Contributions Payable To Date	Balance Outstanding at Close of This Period
	1,000.00	1,000.00	0.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Terms: Loan incurred: 4-15-88 Date Due: NONE Interest Rate: NONE (specify) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors of this loan (see item B)			
1 Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding		
	Name of Employer		
2 Full Name, Mailing Address and ZIP Code	Occupation		
	Amount Guaranteed Outstanding		
	Name of Employer		
3 Full Name, Mailing Address and ZIP Code	Occupation		
	Amount Guaranteed Outstanding		
	Name of Employer		
SUBTOTALS This Period This Page (item A):			
TOTALS This Period (see page 1 in this and only):			
Carry outstanding balance only to Line 8, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

1 R 7 1

LIP DONI FOR CONGRESS COMMITTEE

93040983028

FD-502 (Rev. 1-6-60)

LOAN
(USED TO COMPLETE)

See instructions on back of this form for more information.

Name of Government (in Part) LIPINSKI FOR CONGRESS COMMITTEE			
A. Full Name, Mailing Address and ZIP Code of Loan Source Krytyndak for Senate 5838 Archer Avenue Chicago, IL 60638		Original Amount of Loan 500.00	Balance Outstanding at Close of This Period 0.00
Borrower: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Interest Rate: NONE	
Terms: Date Incurred 5-6-68 Date Due NONE		Guaranteed: <input type="checkbox"/> Secured	
List all Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding Name of Employer Occupation Amount Guaranteed Outstanding		
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding Name of Employer Occupation Amount Guaranteed Outstanding		
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding Name of Employer Occupation Amount Guaranteed Outstanding		
B. Full Name, Mailing Address and ZIP Code of Loan Source Friends of Lipinski II 5638 Archer Avenue Chicago, IL 60638		Original Amount of Loan 1,000.00	Balance Outstanding at Close of This Period 1,000.00
Borrower: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Interest Rate: NONE	
Terms: Date Incurred 10-10-68 Date Due NONE		Guaranteed: <input type="checkbox"/> Secured	
List all Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding Name of Employer Occupation Amount Guaranteed Outstanding		
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding Name of Employer Occupation Amount Guaranteed Outstanding		
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding Name of Employer Occupation Amount Guaranteed Outstanding		
SUBTOTALS This Period This Page Subtotal:			
TOTALS This Period (last page in this form only):			2,000.00
Carry outstanding balance only to L. 802 B, Schedule B for this form. If on Schedule B carry forward to appropriate end of Summary.			

93040983029

Any information received from such Records and Operations may not be used in any manner for the purpose of obtaining contributions or for any other purpose, other than using the name and address of any political operation to solicit contributions from such operation.

NAME OF COMMITTEE OR FUND

LIPINSKI FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code 23rd Ward Demo. Org. 5838 Archer Chicago, IL 60638	Purpose of Disbursement Repayment for Bulk Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/28/88	Amount of Each Disbursement This Period 2,866.63
B. Full Name, Mailing Address and ZIP Code 23rd Ward Demo. Org. 5838 S. Archer Ave. Chicago, IL 60638	Purpose of Disbursement Reimbursement Bulk Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/31/88	Amount of Each Disbursement This Period 956.62
C. Full Name, Mailing Address and ZIP Code Midway Airlines 5959 S. Cicero Chicago, IL 60638	Purpose of Disbursement Lipinski flights to DC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/30/88	Amount of Each Disbursement This Period 258.43
D. Full Name, Mailing Address and ZIP Code Back of the Yards 4625 S. Ashland Ave. Chicago, IL 60608	Purpose of Disbursement Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/25/88	Amount of Each Disbursement This Period 420.00
E. Full Name, Mailing Address and ZIP Code Back of the Yards 4625 S. Ashland Ave. Chicago, IL 60608	Purpose of Disbursement Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/21/88	Amount of Each Disbursement This Period 50.00
F. Full Name, Mailing Address and ZIP Code Central Printers 6109 W. 63rd Street Chicago, IL 60638	Purpose of Disbursement Campaign Cards Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/2/88	Amount of Each Disbursement This Period 2,457.50
G. Full Name, Mailing Address and ZIP Code Central Printers 6109 W. 63rd Street Chicago, IL 60638	Purpose of Disbursement Flyers & Posters Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/1/88	Amount of Each Disbursement This Period 575.45
H. Full Name, Mailing Address and ZIP Code Central Printers 6109 W. 63rd Street Chicago, IL 60638	Purpose of Disbursement Color Brochures Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/2/88	Amount of Each Disbursement This Period 3,412.00
I. Full Name, Mailing Address and ZIP Code Clear Ridge Baseball 6135 S. New England Chicago, IL 60638	Purpose of Disbursement 2 Dinner Tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/15/88	Amount of Each Disbursement This Period 50.00

SUBTOTAL of Disbursements This Page (specify)

TOTAL This Period (use page one line number only)

9304098303

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NAME OF COMMITTEE ON PAGE

LIPINSKI FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Clover Club Beverages, Inc. 5116 S. Ryan Chicago, IL 60638	Purpose of Disbursement Beverages Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/26/88	Amount of Each Disbursement This Period 68.34
B. Full Name, Mailing Address and ZIP Code Cycle Printers 5846 Archer Avenue Chicago, IL 60638	Purpose of Disbursement Pumpkin Jamboree Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/25/88	Amount of Each Disbursement This Period 240.00
C. Full Name, Mailing Address and ZIP Code Cycle Printers 5846 Archer Avenue Chicago, IL 60638	Purpose of Disbursement Folding Material Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/14/88	Amount of Each Disbursement This Period 432.00
D. Full Name, Mailing Address and ZIP Code Dennis G. Berry and Co., Ltd. 115 W. Oak Park Avenue Oak Park, IL 60301	Purpose of Disbursement Professional Services Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/31/88	Amount of Each Disbursement This Period 775.00
E. Full Name, Mailing Address and ZIP Code DesPlaines Valley News 6257 Archer Road Summit, IL 60501	Purpose of Disbursement AJ Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/25/88	Amount of Each Disbursement This Period 160.00
F. Full Name, Mailing Address and ZIP Code Diners Club Chicago, IL	Purpose of Disbursement Morton Rest. Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/22/88	Amount of Each Disbursement This Period 200.00
G. Full Name, Mailing Address and ZIP Code Diners Club Chicago, IL	Purpose of Disbursement Morton Rest. Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/22/88	Amount of Each Disbursement This Period 81.26
H. Full Name, Mailing Address and ZIP Code Midway Airlines 5959 S. Cicero Chicago, IL	Purpose of Disbursement Midway Airlines Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/22/88	Amount of Each Disbursement This Period 188.00
I. Full Name, Mailing Address and ZIP Code Jim Laski 5141 W. Belmont Chicago, IL 60638	Purpose of Disbursement Election Expenses Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/7/88	Amount of Each Disbursement This Period 500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (use page this line number only)

EXPENSES

ITEMIZED DEBITMENTS

The amount indicated for each category of the Standard Budgetary Page

Page 1234 1234

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NAME OF COMMITTEE FOR THE PERIOD

LIPINSKI FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Midway Airlines 5959 S. Cicero Chicago, IL	Purpose of Debitment Airline Tickets Debitment for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/15/88	Amount of Each Debitment This Period 158.00
B. Full Name, Mailing Address and ZIP Code Midway Airlines 5959 S. Cicero Chicago, IL	Purpose of Debitment Airfare Debitment for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/14/88	Amount of Each Debitment This Period 158.00
C. Full Name, Mailing Address and ZIP Code Palos Cicero 3840 147th St. Midlothian, IL	Purpose of Debitment Ad Debitment for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/25/88	Amount of Each Debitment This Period 157.64
D. Full Name, Mailing Address and ZIP Code Palos Reporter 10130 S. Harlem Chicago Ridge, IL 60415	Purpose of Debitment Ad Debitment for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/25/88	Amount of Each Debitment This Period 194.20
E. Full Name, Mailing Address and ZIP Code Raymond Drish 6135 W. 64th Place Chicago, IL	Purpose of Debitment Gifts for Bingo Debitment for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/22/88	Amount of Each Debitment This Period 100.00
F. Full Name, Mailing Address and ZIP Code Raymond Drish 6135 W. 64th Place Chicago, IL	Purpose of Debitment Flags Debitment for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/7/88	Amount of Each Debitment This Period 561.92
G. Full Name, Mailing Address and ZIP Code Rine Post V.F.W. 5832 Archer Avenue Chicago, IL 60638	Purpose of Debitment Rental of Hall Debitment for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/25/88	Amount of Each Debitment This Period 475.00
H. Full Name, Mailing Address and ZIP Code Santo Sports Store 4270 S. Archer Ave. Chicago, IL 60632	Purpose of Debitment Plaques & Trophies Debitment for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/25/88	Amount of Each Debitment This Period 108.66
I. Full Name, Mailing Address and ZIP Code Santo Sports Store 4270 S. Archer Avenue Chicago, IL 60632	Purpose of Debitment Debitment for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/21/88	Amount of Each Debitment This Period 99.44

SUBTOTAL of Debitments This Page (optional)

TOTAL This Period (last page this line number only)

Information shown here is for informational purposes only and should not be used by any person for the purpose of making contributions to any candidate for office, unless such filing the information is in compliance with the provisions of the Federal Election Campaign Act of 1971, as amended, and the regulations thereunder.

Check the appropriate box in Part I

LIPINSKI FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Santa Sports Store 1270 S. Archer Avenue Chicago, IL 60632	Purpose of Disbursement T-shirts Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/2/88	Amount of Each Disbursement This Period 2,428.00
B. Full Name, Mailing Address and ZIP Code Silvestri Printing 10137 S. Harlem Chicago Ridge, IL	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/31/88	Amount of Each Disbursement This Period 300.00
C. Full Name, Mailing Address and ZIP Code St. Synchroson 6135 S. Austin Chicago, IL 60638	Purpose of Disbursement Donation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/26/88	Amount of Each Disbursement This Period 25.00
D. Full Name, Mailing Address and ZIP Code Maurice Rotengrison 6035 S. Wanda Chicago, IL 60638	Purpose of Disbursement Political Activities Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/20/88	Amount of Each Disbursement This Period 300.00
E. Full Name, Mailing Address and ZIP Code Total Disbursements Under \$200.00 in Aggregate	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/28/88	Amount of Each Disbursement This Period 2,975.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

GROSS of Disbursements This Page (includes)

TOTAL This Period (see page 2 for line number only)

21,732.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

The reported disbursements for each category of the Schedule Summary Page

Page 1 of 1

Any information except from such Reports and Statements may not be sold or used by any person for the purpose of collecting 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

LIPINSKI FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Committee to Re-Elect Dem. Senate Springfield, IL	Purpose of Disbursement Loan to Krystyniak for Senate Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 11/5/88	Amount of Each Disbursement This Period 2,500.00
B. Full Name, Mailing Address and ZIP Code Democratic Senate Committee Springfield, IL	Purpose of Disbursement Loan to Krystyniak for Senate Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 11/4/88	Amount of Each Disbursement This Period 2,500.00
C. Full Name, Mailing Address and ZIP Code 12th Ward Demo. Org. Chicago, IL	Purpose of Disbursement Donation Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year) 11/27/88	Amount of Each Disbursement This Period 100.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			
TOTAL This Period (last page this line number only)			\$ 5,100.00

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(OWNED TO COMMITTEE)

Name of Institution to Whom LIPIŃSKI FOR CONGRESS COMMITTEE			
A. Full Name, Mailing Address and ZIP Code of Loan Source Krystyniak for Senate 5838 Archer Avenue Chicago, IL 60638	Original Amount of Loan 2,500.00	Cumulative Payments To Date 2,500.00	Balance Outstanding at Close of This Period 0.00
Secured <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): Terms: Date Incurred <u>11-1-88</u> Date Due <u>None</u> Interest Rate <u>None</u> <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding		
B. Full Name, Mailing Address and ZIP Code of Loan Source Krystyniak for Senate 5838 Archer Avenue Chicago, IL 60638	Original Amount of Loan 2,500.00	Cumulative Payments To Date 0.00	Balance Outstanding at Close of This Period 2,500.00
Secured <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): Terms: Date Incurred <u>11-1-88</u> Date Due <u>None</u> Interest Rate <u>None</u> <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding		
SUBTOTALS This Period (This Page bottom):			
TOTALS This Period (Last page of this form only):			
Carry outstanding balance only to LINE 2, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

2/1/71 FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code of Loan Recipient Friends of Lipinski II 5838 Archer Avenue Chicago, IL 60638		Original Amount of Loan 1,000.00	Accumulative Payments To Date 0.00	Balance Outstanding at Close of This Period 1,000.00
Source: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Secondary <input type="checkbox"/> Other (specify): _____ Form Due: <u>3-2-88</u> Interest Paid: <u>None</u> U. Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed/Outstanding \$ Name of Employer Occupation Amount Guaranteed/Outstanding \$ Name of Employer Occupation Amount Guaranteed/Outstanding \$		
2. Full Name, Mailing Address and ZIP Code				
3. Full Name, Mailing Address and ZIP Code				
B. Full Name, Mailing Address and ZIP Code of Loan Recipient Friends of Lipinski II 5838 Archer Avenue Chicago, IL 60638				
		Original Amount of Loan 1,000.00	Accumulative Payments To Date 0.00	Balance Outstanding at Close of This Period 1,000.00
Source: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Secondary <input type="checkbox"/> Other (specify): _____ Form Due: <u>10-10-88</u> Interest Paid: <u>None</u> U. Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed/Outstanding \$ Name of Employer Occupation Amount Guaranteed/Outstanding \$ Name of Employer Occupation Amount Guaranteed/Outstanding \$		
2. Full Name, Mailing Address and ZIP Code				
3. Full Name, Mailing Address and ZIP Code				
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this loan only)				
Carry outstanding balance only to L. 000 2, Schedule B, for this loan. If on Schedule B, carry forward to appropriate line of Summary.				



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

March 9, 1992

The Honorable Martin Russo
12250 S. Cicero Ave.
Alsip, IL 60658

RE: MUR 3479

Dear Mr. Russo:

This letter acknowledges receipt on March 3, 1992, of your complaint alleging possible violations of the Federal Election Campaign Act of 1971, as amended ("the Act"), by Lipinski for Congress Committee and John Mooney, as treasurer and William O. Lipinski. The respondents will be notified of this complaint within five days.

You will be notified as soon as the Federal Election Commission takes final action on your complaint. Should you receive any additional information in this matter, please forward it to the Office of the General Counsel. Such information must be sworn to in the same manner as the original complaint. We have numbered this matter MUR 3479. Please refer to this number in all future correspondence. For your information, we have attached a brief description of the Commission's procedures for handling complaints.

Sincerely,

A handwritten signature in dark ink, appearing to read "Lisa Klein", is written over a light-colored background.

Lisa Klein
Assistant General Counsel

Enclosure
Procedures

93040983037



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

March 9, 1992

PERSONAL & CONFIDENTIAL

The Honorable William O. Lipinski
1501 Longworth House Office Building
Washington, D.C. 20515-1305

RE: MUR 3479

The Hon. William O. Lipinski

Dear Mr. Lipinski:

The Federal Election Commission received a complaint which alleges that you may have violated the Federal Election Campaign Act of 1971, as amended ("the Act"). A copy of the complaint is enclosed. We have numbered this matter MUR 3479. Please refer to this number in all future correspondence.

Under the Act, you have the opportunity to demonstrate in writing that no action should be taken against you in this matter. Please submit any factual or legal materials which you believe are relevant to the Commission's analysis of this matter. Where appropriate, statements should be submitted under oath. Your response, which should be addressed to the General Counsel's Office, must be submitted within 15 days of receipt of this letter. If no response is received within 15 days, the Commission may take further action based on the available information.

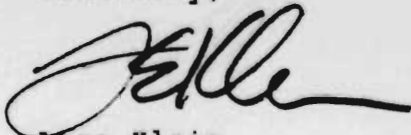
This matter will remain confidential in accordance with 2 U.S.C. § 437g(a)(4)(B) and § 437g(a)(12)(A) unless you notify the Commission in writing that you wish the matter to be made public. If you intend to be represented by counsel in this matter, please advise the Commission by completing the enclosed form stating the name, address and telephone number of such counsel, and authorizing such counsel to receive any notifications and other communications from the Commission.

93040983038

The Hon. William Lipinski
Page 2

If you have any questions, please contact Dawn M. Odrowski, the attorney assigned to this matter, at (202) 219-3400 or (800) 424-9530. For your information, we have enclosed a brief description of the Commission's procedures for handling complaints.

Sincerely,



Lisa Klein
Assistant General Counsel

Enclosures

1. Complaint
2. Procedures
3. Designation of Counsel Statement

93040983039



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

March 9, 1992

Mr. John Mooney, Treasurer
Lipinski for Congress Committee
6242 W. 59th St.
Chicago, IL 60638

RE: MUR 3479
Lipinski for Congress
Committee and John Mooney,
as treasurer

Dear Mr. Mooney:

The Federal Election Commission received a complaint which alleges that Lipinski for Congress Committee (the "Committee") and you, as treasurer, may have violated the Federal Election Campaign Act of 1971, as amended ("the Act"). A copy of the complaint is enclosed. We have numbered this matter MUR 3479. Please refer to this number in all future correspondence.

Under the Act, you have the opportunity to demonstrate in writing that no action should be taken against the Committee and you, as treasurer, in this matter. Please submit any factual or legal materials which you believe are relevant to the Commission's analysis of this matter. Where appropriate, statements should be submitted under oath. Your response, which should be addressed to the General Counsel's Office, must be submitted within 15 days of receipt of this letter. If no response is received within 15 days, the Commission may take further action based on the available information.

This matter will remain confidential in accordance with 2 U.S.C. § 437g(a)(4)(B) and § 437g(a)(12)(A) unless you notify the Commission in writing that you wish the matter to be made public. If you intend to be represented by counsel in this matter, please advise the Commission by completing the enclosed form stating the name, address and telephone number of such counsel, and authorizing such counsel to receive any notifications and other communications from the Commission.

93040983040

Mr. John Mooney, Treasurer
Lipinski for Congress Committee
Page 2

If you have any questions, please contact Dawn M. Odrowski, the attorney assigned to this matter, at (202) 219-3400 or (800) 424-9530. For your information, we have enclosed a brief description of the Commission's procedures for handling complaints.

Sincerely,



Lisa Klein
Assistant General Counsel

Enclosures

1. Complaint
2. Procedures
3. Designation of Counsel Statement

93040983041

Dennis G. Kenny & Company, Ltd.
CERTIFIED PUBLIC ACCOUNTANTS

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

MAR 25 9 54 AM '92

March 23, 1992

Ms. Dawn M. Odrowski, Attorney
Federal Election Commission
999 E. Street N.W.
Washington, D.C. 20463

92 MAR 25 AM 10:23

Re: MUR3479 The Honorable William O. Lipinski

We are enclosing the amended statement of organization FEC Form 1, as you requested. We have added to line 9 the name and address of the Evergreen Bank account which is the Friends of Lipinski I checking account previously discussed with Emily Leonard, Report Analyst on 7-23-91 (see attached memo). All of the receipts and disbursements of the Friends of Lipinski I account was reflected in all of the FEC Form 3 Report of Receipts and Disbursements from its inception.

As we explained to you, the Lipinski for Congress Committee has two checking accounts- one at the American National Bank with the name Lipinski for Congress and one account with the name Friends of Lipinski I, a division of Lipinski for Congress Committee. It has a roman numeral I. The state committee has a roman numeral II.

Federal Committee Accounts

1. Lipinski for Congress Committee
2. Friends of Lipinski I Div
of Lipinski for Congress

State Committee Accounts

1. 23rd Ward Democratic
Organization
2. Friends of Lipinski
II, Div 23rd Ward
Democractic Org.

Hope this clarifies matters. Any questions, please call or write.

Sincerely Yours



Dennis G. Kenny & Co., Ltd.
Certified Public Accountants

DGK:ss
Enclosure

93040983042

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL LIPINSKI FOR CONGRES COMMITTEE	<input type="checkbox"/> (Check if name is changed)	2. DATE MARCH 23, 1992
(b) Number and Street Address 6242 W. 59th STREET	<input type="checkbox"/> (Check if address is changed)	3. FEC IDENTIFICATION NUMBER 098167
(c) City, State and ZIP Code Chicago, IL 60638	4. IS THIS STATEMENT AN AMENDMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

5. TYPE OF COMMITTEE (Check one)

- ☐ (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- ☐ (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | | | | |
|-------------------|-----------------------------|---------------|----------------|
| Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
- ☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- ☐ (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- ☐ (e) This committee is a separate segregated fund.
- ☐ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
-----------	-----------------	-------------------

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee, and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
-----------	-----------------	-------------------

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
AMERICAN NATIONAL BANK	1836 N. BROADWAY, MELROSE PARK, IL 60160
FIRST NATIONAL BANK OF EVERGREEN PK	3101 W. 95TH ST., EVERGREEN PK, IL 60442

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

TYPE OR PRINT NAME OF TREASURER John Mooney	SIGNATURE OF TREASURER <i>John Mooney</i>	DATE 3-24-92
---	--	------------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-376-3120

FEC FORM 1
(revised 4/87)

93040983043

STATEMENT OF DESIGNATION OF COUNSEL

MUR 3479

NAME OF COUNSEL: Our C.P.A. Dennis G. Kenny who prepares the report

ADDRESS: 115 N. Oak Park Avenue

Oak Park, IL 60301

TELEPHONE: (708) 386-0600

The above-named individual is hereby designated as my
counsel and is authorized to receive any notifications and other
communications from the Commission and to act on my behalf before
the Commission.

3-23-92
Date

John Mooney
Signature

RESPONDENT'S NAME: John Mooney

ADDRESS: Lipinski For Congress Committee

6242 W. 59th Street

Chicago, IL 60638

HOME PHONE: _____

BUSINESS PHONE: (312) 582-7323

92 MAR 25 AM 10:23

93040983044

MEMO - NOTE FROM: Emily Leonard

TO: Dennis

FEC 202-376-2480

DATE: 7-23-91

RE: Lipinski For Congress Committee

~~Re:~~ 2 CKing Accts - Lipinski Congress
- Filed Lipinski

We have been reporting both checking
accounts on Form 3 together because
there is one committee with
2 accounts.

7-23-91 Emily Leonard called back after
talking to her supervisor. She said it's
OK to file transcripts of Lipinski & Lipinski
for Congress together - the way we have
been filing them

☐ REPLY ☐ SEE ME
☐ INITIAL AND RETURN

SIGNED:

Dennis J. Denny

92 MAR 25 AM 10:23

RECEIVED
FEDERAL ELECTION COMMISSION
MAR 25 1991

93040983045



STATE POLITICAL COMMITTEE
STATE BOARD OF ELECTIONS
190 ILL. PARK PLAZA, BOX 612
SPRINGFIELD, ILLINOIS 62702

LOCAL POLITICAL COMMITTEE—RETURN TO:
APPROPRIATE COUNTY CLERK

STATE OF ILLINOIS OFFICE OF THE CLERK OF THE SUPREME COURT JANUARY 1974	
D-1 STATEMENT OF ORGANIZATION	

THIS SPACE FOR OFFICE USE ONLY		
P.M. DATE	DATE RECEIVED	IDENTIFICATION NUMBER
	10/23/74	00805

SEE INSTRUCTIONS ON REVERSE SIDE
Type or Print Clearly

NAME AND ADDRESS OF POLITICAL COMMITTEE
FRANK J. KUTA, COMMITTEEMAN
23rd WARD DEMOCRATIC ORGANIZATION
5714 ARCHER
CHICAGO, ILL 60638

DATE STATEMENT PREPARED 18 OCT 74	THIS FORM REPRESENTS: <input type="checkbox"/> THE INITIAL FILING OF FORM D-1; OR <input type="checkbox"/> AN AMENDMENT TO THE LAST FORM D-1 FILED. (GIVE FILING DATE OF LAST FORM D-1 BELOW)		
DATE COMMITTEE CREATED 1 OCT 74			
	MONTH	DAY	YEAR

VERIFICATION

I declare that this statement of organization (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of organization as required by Article 9 of The Election Code. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$500 or imprisonment in a penal institution other than the penitentiary not to exceed 6 months, or both fine and imprisonment.

18 OCT 74
DATE

Frank J. Kuta
SIGNATURE OF TREASURER

INSTRUCTIONS

WHO SHOULD FILE THIS FORM: All Political Committees. (See definition on reverse side).
FILING DEADLINE:

- State Political Committees in existence on October 1, 1974; October 21, 1974
- State Political Committees created after October 1, 1974; within 30 days of creation
- Local Political Committees in existence on January 1, 1975; January 31, 1975
- Local Political Committees created after January 1, 1975; within 30 days
- Changes of any information previously submitted; within 10 days

NOTE: Use Form D-1A on reverse side if additional space is required to complete any of the items on this form.

ITEM 1 POLITICAL COMMITTEE'S AREA OF ACTIVITY, SCOPE, AND PARTY AFFILIATIONS

- A. THIS IS ☐ A STATE POLITICAL COMMITTEE
☐ A LOCAL POLITICAL COMMITTEE
☒ BOTH A STATE AND A LOCAL POLITICAL COMMITTEE

B. WILL THIS COMMITTEE OPERATE STATEWIDE? **NO**

C. WILL THIS COMMITTEE OPERATE IN ONE COUNTY ONLY? **YES**

IF YES, WHAT COUNTY? **COOK**

D. IF B AND C ABOVE ARE ANSWERED "NO," IN WHAT COUNTIES OR POLITICAL AREAS WILL THE COMMITTEE OPERATE?

E. THIS COMMITTEE WILL PRIMARILY ☒ SUPPORT ☐ OPPOSE CANDIDATES FOR LOCAL OR STATE OFFICES.

F. THIS COMMITTEE WILL ☒ SUPPORT ☐ OPPOSE QUESTIONS OF PUBLIC POLICY

G. COMMITTEE'S PARTY AFFILIATION: **DEMOCRATIC**

* Submit additional information on continuation sheet(s) D-1A attached to this STATEMENT OF ORGANIZATION.

RECEIVED
FEDERAL ELECTION COMMISSION
OFFICE OF THE CLERK OF THE SUPREME COURT
92 SEP -4 PM 4:09

93040983046

ITEM 2	CANDIDATE(S) THE COMMITTEE IS TO SUPPORTING OR TO OPPOSING OR UNDESIRABLE TO SUPPORTING entire party ticket. (show only party name)		
	NAME	OFFICE	PARTY AFFILIATION
			DEMOCRATIC

ITEM 3	COMMITTEE'S PRINCIPAL OFFICERS, INCLUDING CHAIRMAN, TREASURER, OFFICERS, AND MEMBERS OF FINANCE COMMITTEE (if any)		
	NAME	ADDRESS	POSITION
	FRANK J. KUTA	5784 ARCHER CHICAGO, ILL 60638	CHAIRMAN & TREASURER

ITEM 4	THIS POLITICAL COMMITTEE <input checked="" type="checkbox"/> IS A CONTINUING ORGANIZATION <input type="checkbox"/> IS NOT A CONTINUING ORGANIZATION
--------	---

ITEM 5	THE AMOUNT OF FUNDS AVAILABLE FOR CAMPAIGN EXPENDITURES AS OF THE DATE OF FILING THIS STATEMENT OF ORGANIZATION IS: 7,895.50
--------	--

ITEM 6	PURPOSE(S) OF THE POLITICAL COMMITTEE: THE PURPOSE OF THIS COMMITTEE IS TO SUPPORT THE DEMOCRATIC TICKET AND PLATFORM AND OPPOSE ALL OTHER TICKETS OF OPPOSING PARTIES, ALSO TO OPPOSE ALL QUESTIONS OF PUBLIC POLICY NOT CONSISTENT WITH DEMOCRATIC PARTY PLATFORM AND TO SUPPORT QUESTIONS OF PUBLIC POLICY THAT ARE CONSISTENT.
--------	---

ITEM 7	NAME, ADDRESS, AND POSITION OF EACH CUSTODIAN OF THE COMMITTEE'S BOOKS AND ACCOUNTS		
	NAME	ADDRESS	POSITION
	FRANK J. KUTA	5784 ARCHER CHICAGO, ILL 60638	CUSTODIAN

ITEM 8	ALL BANKS OR OTHER FINANCIAL INSTITUTIONS, SAFETY DEPOSIT BOXES, AND ANY OTHER REPOSITORIES OR CUSTODIANS OF FUNDS USED BY THE COMMITTEE: NAME GARFIELD RIDGE TRUST & SAVINGS BANK MID-AMERICA DEMOCRATIC CREDIT UNION
--------	--

ITEM 9	SPECIFIC DISPOSITION OF RESIDUAL FUNDS IN THE EVENT OF THE DISSOLUTION OR TERMINATION OF THE COMMITTEE: ALL FUNDS STILL REMAINING WILL BE TRANSFERRED TO SUCCESSOR COMMITTEEMAN OF THE 23RD WARD OR TO A POLITICAL ORGANIZATION IN THE WARD WHICH SUPPORTS THE DEMOCRATIC PLATFORM AND PRINCIPLES.
--------	---

* Submit additional information on continuation sheet(s) D-1A attached to this STATEMENT OF ORGANIZATION.

93040983047

92 SEP -4 PM 4:09
RECEIVED
FEDERAL ELECTION COMMISSION



STATE POLITICAL COMMITTEES—RETURN TO:
STATE BOARD OF ELECTIONS
170 ILL. PARK PLACE—P.O. BOX 6187
SPRINGFIELD, ILLINOIS 62763

LOCAL POLITICAL COMMITTEES—RETURN TO:
APPROPRIATE COUNTY CLERK

FORM D-1	AMENDED STATEMENT OF ORGANIZATION
--------------------	--------------------------------------

THIS SPACE FOR OFFICE USE ONLY		
P.M. DATE	DATE RECEIVED	IDENTIFICATION NUMBER
		9812

SEE INSTRUCTIONS ON REVERSE SIDE
Type or Print Clearly

NAME AND ADDRESS OF POLITICAL COMMITTEE

23rd WARD DEMOCRATIC ORGANIZATION
LIVING
WILLIAM O. LIPINSKI, COMMITTEE MAN
5784 ARCHER
CHICAGO, ILL 60638

DATE STATEMENT
PREPARED

FEB 3, 1975

DATE COMMITTEE
CREATED

THIS FORM REPRESENTS

☐ THE INITIAL FILING OF FORM D-1, OR
☒ AN AMENDMENT TO THE LAST FORM
D-1 FILED. (GIVE FILING DATE OF
LAST FORM D-1 BELOW)

MONTH	DAY	YEAR
OCT	18	1974

VERIFICATION

I declare that this statement of organization (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of organization as required by Article 9 of The Election Code. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$500 or imprisonment in a penal institution other than the penitentiary not to exceed 6 months, or both fine and imprisonment.

FEB 3, 1975
DATE

William O. Lipinski
SIGNATURE OF TREASURER

INSTRUCTIONS

WHO SHOULD FILE THIS FORM: All Political Committees. (See definition on reverse side).
FILING DEADLINE:

- State Political Committee in existence on October 1, 1974; October 21, 1974
- State Political Committee created after October 1, 1974; within 30 days of creation
- Local Political Committee in existence on January 1, 1975; January 21, 1975
- Local Political Committee created after January 1, 1975; within 30 days
- Changes of any information previously submitted; within 10 days

NOTE: Use Form D-1A on reverse side if additional space is required to complete any of the items on this form.

ITEM 1 POLITICAL COMMITTEE'S AREA OF ACTIVITY, SCOPE, AND PARTY AFFILIATIONS

- A THIS IS ☐ A STATE POLITICAL COMMITTEE
☐ A LOCAL POLITICAL COMMITTEE
☐ BOTH A STATE AND A LOCAL POLITICAL COMMITTEE

B WILL THIS COMMITTEE OPERATE STATEWIDE?

C WILL THIS COMMITTEE OPERATE IN ONE COUNTY ONLY?

IF YES, WHAT COUNTY?

D IF B AND C ABOVE ARE ANSWERED "NO" IN WHAT COUNTIES OR POLITICAL AREA(S) WILL THE COMMITTEE OPERATE?

F THIS COMMITTEE WILL PRIMARILY ☐ SUPPORT ☐ OPPOSE CANDIDATES FOR LOCAL OR STATE OFFICES

F THIS COMMITTEE WILL ☐ SUPPORT ☐ OPPOSE QUESTIONS OF PUBLIC POLICY

G COMMITTEE'S PARTY AFFILIATION:

• Submit additional information on continuation sheet(s) D-1A attached to this STATEMENT OF ORGANIZATION

92 SEP -4 PM 4:09

RECEIVED
FEDERAL ELECTION COMMISSION
OFFICE OF THE CLERK

93040983048

ITEM 2	CANDIDATE(S) THE COMMITTEE IS (IS) SUPPORTING OR IS OFFERING TO SUPPORT. (If supporting entire party ticket, check only party name)		
	NAME	OFFICE	PARTY AFFILIATION

ITEM 3	COMMITTEE'S PRINCIPAL OFFICERS, INCLUDING CHAIRMAN, TREASURER, OFFICERS, AND MEMBERS OF FINANCE COMMITTEE (If any)		
	NAME	ADDRESS	POSITION
	WILLIAM O. LIPINSKI	5784 ARCHER AVE CHICAGO, ILL. 60638	ACTING- COMMITTEEMAN CHAIRMAN & TREASURER
		REPLACING FRANK J. KITA EFFECTIVE JAN 24, 1975	

ITEM 4

THIS POLITICAL COMMITTEE

☐ IS A CONTINUING ORGANIZATION.

☐ IS NOT A CONTINUING ORGANIZATION.

ITEM 5

THE AMOUNT OF FUNDS AVAILABLE FOR CAMPAIGN EXPENDITURES AS OF THE DATE OF FILING THIS STATEMENT OF ORGANIZATION IS \$.

ITEM 6

PURPOSE(S) OF THE POLITICAL COMMITTEE

ITEM 7	NAME, ADDRESS, AND POSITION OF EACH CUSTODIAN OF THE COMMITTEE'S BOOKS AND ACCOUNTS		
	NAME	ADDRESS	POSITION
	WILLIAM O. LIPINSKI	5784 ARCHER AVE CHICAGO, ILL 60638	CUSTODIAN (REPLACING FRANK J. KITA) EFFECTIVE JAN 25, 1975

ITEM 8

ALL BANKS OR OTHER FINANCIAL INSTITUTIONS, SAFETY DEPOSIT BOXES, AND ANY OTHER REPOSITORIES OR CUSTODIANS OF FUNDS USED BY THE COMMITTEE

NAME

ITEM 9

SPECIFIC DISPOSITION OF RESIDUAL FUNDS IN THE EVENT OF THE DISSOLUTION OR TERMINATION OF THE COMMITTEE

92 SEP 14 PM 4:09

RECEIVED
FEDERAL ELECTION COMMISSION
OFFICE OF THE CLERK

93040983049

OGC 6344

D. Odowski
MUR 3479



FORM
D-1
STATEMENT OF ORGANIZATION
PLEASE TYPE OR PRINT IN BLACK INK

THIS SPACE FOR OFFICE USE ONLY

Full name and complete mailing address of Political Committee

23rd Ward Democratic Organization
William O. Lipinski, Committeeman
5838 S. Archer
Chicago, IL 60638

RECEIVED

FEB - 81

STATE BOARD OF ELECTIONS

☐ CHECK IF ADDRESS CHANGE

IDENTIFICATION NO.	AUDIT DIST.
805 -- 3	

SEE ACCOMPANYING SHEET FOR INSTRUCTIONS

1. Date Statement Prepared <u>1/3/84</u>	2. Date Committee Created _____	3. Amount of Funds Available for Campaign Expenditures As of the Date the Committee was Created \$ <u>(THIS CANNOT EXCEED \$1000.00)**</u>
---	------------------------------------	---

4. If this form is used to amend previous Statement of Organization give date the last statement was prepared. _____

5. Political Committee's Area of Activity, Scope, and Party Affiliation*

A—This is ☐ A State Political Committee
 ☐ A Local Political Committee ☒ A State and Local Political Committee

B—Will this committee operate statewide? No

C—Will this committee operate in one county only? Yes If yes, what county? Cook

D—if B and C above are answered "No," in what counties or political areas will the committee operate? _____

E—This committee will primarily ☒ Support ☐ Oppose candidates for local or state offices

F—This committee will ☒ Support ☐ Oppose questions of public policy

G—Name of political party committee is affiliated with Democratic

H—County of residence of candidate Cook

6. Purpose(s) of the Political Committee*

The purpose of the committee is to elect the candidates for public office endorsed by the organization and to support or oppose questions of public policy endorsed by the organization.

7. Committee's Principal Officers, including Chairman, Treasurer, Officers, and Members of Finance Committee (if any)*

Name	Address	Position
John Mooney	5838 S. Archer Chicago, IL 60638	Treasurer
William O. Lipinski	5838 S. Archer Chicago, IL 60638	Committeeman

*If more space for information is required, please attach additional sheets.
**See Manual of Instructions.

92 SEP - 8 AM 9:25

RECEIVED
FEDERAL ELECTION COMMISSION
OFFICE OF THE CLERK
WASHINGTON, D.C. 20543

93040983050

Name of Political Committee

23rd Ward Democratic Organization

Identification Number

805 -- 3

8. Candidate(s) the Committee is supporting or opposing (if Committee is supporting entire party ticket, show only party name)*

Name	Support	Oppose	Office	Party Affiliation
Democratic	X			

RECEIVED
FEB - 1971
STATE BOARD OF ELECTIONS

9. Name, address, and position of each custodian of the Committee's books and accounts

Name	Address	Position
John Mooney	5838 S. Archer Chicago, IL 60638	Treasurer

10. All banks or other financial institutions, safety deposit boxes, and any other repositories of custodians of funds used by the Committee*

Name	Address
American National Bank and Trust Company of Chicago	33 North LaSalle Street, Chicago, IL 60690

11. Specific disposition of residual funds in the event of the dissolution or termination of the Committee* All funds remaining at dissolution or termination will be turned, prorata to all the contributors of the immediately preceding 12 month period of transferred to other political or charitable organizations consistent with the positions of the committee or the candidates it represented.

VERIFICATION

I declare that this Statement of Organization (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete Statement of Organization as required by Article 9 of THE ELECTION CODE. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$500 or imprisonment in a penal institution other than the penitentiary not to exceed 6 months, or both fine and imprisonment.

Jan. 3 - 89
Date

John Mooney
Signature of Treasurer or Candidate

The Illinois State Board of Elections is requesting disclosure of information that is necessary if you qualify as a political committee as outlined under Public Act 78-1183. Disclosure of this information is required for use to prosecute any information could result in a fine up to \$1,000. This form is in compliance with the Truth in Campaigning Program Act.

State Political Committees
Return To:
State Board of Elections
1020 South Spring Street
P.O. Box 4787
Springfield, Illinois 62708

Local Political Committees
Return To:
Appropriate County Clerk

State and Local Political
Committees: Original to State
Board of Elections and copy to
appropriate County Clerk

93040983051



LOCAL POLITICAL COMMITTEE—RETURN TO:
APPROPRIATE COUNTY CLERK
P.S.

JUL 11 1975

FORM D-1	STATEMENT OF ORGANIZATION
--------------------	---------------------------

STATE BOARD OF THE
ELECTIONS

SEE
INSTRUCTIONS
ON
REVERSE
SIDE

STATE POLITICAL COMMITTEES—
RETURN TO:
STATE BOARD OF ELECTIONS
110 ILES PARK PLACE—P.O. BOX 4187
SPRINGFIELD, ILLINOIS 62703

THIS SPACE FOR OFFICE USE ONLY		
P.M. DATE	DATE RECEIVED	IDENTIFICATION NUMBER
		5-00805

FULL NAME AND COMPLETE MAILING ADDRESS
OF POLITICAL COMMITTEE

23-1 WARD REGULAR DEMOCRATIC ORG
WILLIAM O. LIPINSKI, COMMITTEEMAN
5784 ARCHER
CHICAGO, ILLINOIS 60638

DATE STATEMENT
PREPARED

JULY 9, 1975

DATE COMMITTEE
CREATED

OCT 1, 1974

IF THIS FORM IS USED TO AMEND
PREVIOUS STATEMENT OF ORGANIZA-
TION GIVE DATE THE LAST STATE-
MENT WAS PREPARED.

MONTH	DAY	YEAR
FEB	3	1975

VERIFICATION

I declare that this statement of organization (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of organization as required by Article 9 of The Election Code. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$500 or imprisonment in a penal institution other than the penitentiary not to exceed 6 months, or both fine and imprisonment.

JULY 9, 1975
DATE

William O. Lipinski
SIGNATURE OF TREASURER

INSTRUCTIONS

WHO SHOULD FILE THIS STATEMENT OF ORGANIZATION: All Political Committees (See definition on reverse side).
FILING DEADLINE:

- State Political Committees in existence on October 1, 1974: October 21, 1974
- State Political Committees created after October 1, 1974: within 30 days of creation
- Local Political Committees in existence on January 1, 1975: January 31, 1975
- Local Political Committees created after January 1, 1975: within 30 days
- Changes of any information previously submitted: within 10 days

NOTE: Use Form D-1A on reverse side if additional space is required to complete any of the items on this form.

ITEM 1 POLITICAL COMMITTEE'S AREA OF ACTIVITY, SCOPE, AND PARTY AFFILIATION

- THIS IS ☐ A STATE POLITICAL COMMITTEE
☐ A LOCAL POLITICAL COMMITTEE
- WILL THIS COMMITTEE OPERATE STATEWIDE?
- WILL THIS COMMITTEE OPERATE IN ONE COUNTY ONLY? IF YES, WHAT COUNTY?
- IF B AND C ABOVE ARE ANSWERED "NO," IN WHAT COUNTIES OR POLITICAL AREA(S) WILL THE COMMITTEE OPERATE?

- THE COMMITTEE WILL PRIMARILY SUPPORT OR OPPOSE CANDIDATES FOR LOCAL OR STATE OFFICES
- THE COMMITTEE WILL SUPPORT OR OPPOSE QUESTIONS OF PUBLIC POLICY
- NAME OF POLITICAL PARTY COMMITTEE IS AFFILIATED WITH

• Submit all additional information on continuation sheets if it is attached to this STATEMENT OF ORGANIZATION.

23040983052

93040983053

ITEM 2

NAME

Support

Oppose

Office

PARTY AFFILIATION

ITEM 3

COMMITTEE'S PRINCIPAL OFFICERS, INCLUDING CHAIRMAN, TREASURER, OFFICERS, AND MEMBERS OF FINANCE COMMITTEE (if any):

NAME

ADDRESS

POSITION

ITEM 4

THIS POLITICAL COMMITTEE

☐ IS A CONTINUING ORGANIZATION.

☐ IS NOT A CONTINUING ORGANIZATION.

ITEM 5

AMOUNT OF FUNDS AVAILABLE FOR CAMPAIGN EXPENDITURES AS OF THE DATE THE COMMITTEE WAS CREATED :

ITEM 6

PURPOSE(S) OF THE POLITICAL COMMITTEE:

ITEM 7

NAME, ADDRESS, AND POSITION OF EACH CUSTODIAN OF THE COMMITTEE'S BOOKS AND ACCOUNTS

NAME

ADDRESS

POSITION

ITEM 8

ALL BANKS OR OTHER FINANCIAL INSTITUTIONS, SAFETY DEPOSIT BOXES, AND ANY OTHER REPOSITORIES OR CUSTODIANS OF FUNDS USED BY THE COMMITTEE:

NAME

ADD

AMERICAN NATIONAL BANK & TRUST COMPANY OF CHICAGO

ITEM 9

SPECIFIC DISPOSITION OF RESIDUAL FUNDS IN THE EVENT OF THE DISSOLUTION OR TERMINATION OF THE COMMITTEE:

* Submit additional information on continuation sheet(s) D-1A attached to this STATEMENT OF ORGANIZATION.



STATE POLICE COMMISSION - OFFICE OF
STATE BOARD OF ELECTIONS
1700 EAST PULASKI - 2ND FLOOR
SPRINGFIELD, ILLINOIS 62760

LOCAL POLICE COMMISSION - REFER TO:
APPROPRIATE COUNTY CLERK

D-1	STATEMENT OF ORGANIZATION	

THIS SPACE FOR OFFICE USE ONLY		
P.M. DATE	DATE RECEIVED	IDENTIFICATION NUMBER
10/21/74	10/23/74	00-804

SEE INSTRUCTIONS ON REVERSE SIDE

Type or Print Clearly

NAME AND ADDRESS OF POLITICAL COMMITTEE:

STEWART UNITED REPUBLICAN
ORGANIZATION

2809 W. 62ND ST.

CHICAGO, ILL. 60629

DATE STATEMENT PREPARED 10-1-74	THIS FORM REPRESENTS: <input type="checkbox"/> THE INITIAL FILING OF FORM D-1; OR <input type="checkbox"/> AN AMENDMENT TO THE LAST FORM D-1 FILED. (GIVE PLEASE DATE OF LAST FORM D-1 BELOW)		
DATE COMMITTEE CREATED 10-1-74	MONTH	DAY	YEAR

VERIFICATION

I declare that this statement of organization (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of organization as required by Article 9 of the Election Code. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine of \$1,000 or imprisonment in a penal institution other than the penitentiary not to exceed 6 months, or both fine and imprisonment.

10-1-74

DATE

Paul C. Kelly
SIGNATURE OF TREASURER

INSTRUCTIONS

WHO SHOULD FILE THIS FORM: All Political Committees. (See definition on reverse side).
FILING DEADLINE:

- State Political Committee in existence on October 1, 1974; October 21, 1974
- State Political Committee created after October 1, 1974; within 30 days of creation
- Local Political Committee in existence on January 1, 1975; January 31, 1975
- Local Political Committee created after January 1, 1975; within 30 days
- Changes of any information previously submitted; within 10 days

NOTE: Use Form D-1A on reverse side if additional space is required to complete any of the items on this form.

92 SEP -8 PM 3:16

RECEIVED
FEDERAL ELECTION COMMISSION
OFFICE OF ORGANIZATION AND REGISTRATION

ITEM 1 POLITICAL COMMITTEE'S AREA OF ACTIVITY, SCOPE, AND PARTY AFFILIATIONS

- A-THE IS ☐ A STATE POLITICAL COMMITTEE
☐ A LOCAL POLITICAL COMMITTEE
☒ BOTH A STATE AND A LOCAL POLITICAL COMMITTEE

B-WILL THIS COMMITTEE OPERATE STATEWIDE? NO

C-WILL THIS COMMITTEE OPERATE IN ONE COUNTY ONLY? YES IF YES, WHAT COUNTY? COOK

D-IF B AND C ABOVE ARE ANSWERED "NO," IN WHAT COUNTIES OR POLITICAL AREA(S) WILL THE COMMITTEE OPERATE?

E-THE COMMITTEE WILL PRIMARILY ☒ SUPPORT ☒ OPPOSE CANDIDATES FOR LOCAL OR STATE OFFICES.

F-THE COMMITTEE WILL ☒ SUPPORT ☒ OPPOSE QUESTIONS OF PUBLIC POLICY

G-COMMITTEE'S PARTY AFFILIATION: REPUBLICAN

Submit additional information on continuation sheet(s) D-1A attached to this STATEMENT OF ORGANIZATION.

93040983054

ITEM 2

REPUBLICAN PARTY

ITEM 3

COMMITTEE'S PRINCIPAL OFFICERS, INCLUDING CHAIRMAN, TREASURER, OFFICERS, AND MEMBERS OF FINANCE COMMITTEE IN 1970

NAME	ADDRESS	POSITION
WALTER K. KILTZ	3809 W. 63rd ST.	CHAIRMAN
RUTH C. KILTZ	3809 W. 63rd ST.	TREASURER
HALEY UCHISON	5034 S. ROCKWELL ST.	FINANCE COM.
DOLores SOLTIS	4423 S. KOMENSKY	FINANCE COM.

ITEM 4

THIS POLITICAL COMMITTEE

☒ IS A CONTINUING ORGANIZATION.☐ IS NOT A CONTINUING ORGANIZATION.

ITEM 5

THE AMOUNT OF FUNDS AVAILABLE FOR CAMPAIGN

EXPENDITURES AS OF THE DATE OF FILING THIS STATEMENT OF ORGANIZATION IS \$ 4606.47

ITEM 6

PURPOSES OF THE POLITICAL COMMITTEE

TO ELICIT REPUBLICAN CANDIDATES

ITEM 7

NAME, ADDRESS AND POSITION OF EACH CUSTODIAN OF THE COMMITTEE'S BOOKS AND ACCOUNTS

NAME	ADDRESS	POSITION
WALTER K. KILTZ	3809 W. 63rd ST.	CHAIRMAN
RUTH C. KILTZ	3809 W. 63rd ST.	TREASURER
HALEY UCHISON	5034 S. ROCKWELL ST.	FINANCE COM.
DOLores SOLTIS	4423 S. KOMENSKY	FINANCE COM.

ITEM 8

ALL BANKS OR OTHER FINANCIAL INSTITUTIONS, SAFETY DEPOSIT BOXES, AND ANY OTHER REPOSITORIES OR CUSTODIANS OF FUNDS USED BY THE COMMITTEE

MARQUETTE NATIONAL BANK
6324 WESTERN AVE

ITEM 9

SPECIFIC DISPOSITION OF RESIDUAL FUNDS IN THE EVENT OF THE DISSOLUTION OR TERMINATION OF THE COMMITTEE

TO BE GIVEN TO REPUBLICAN CENTRAL COMMITTEE OF
COOK COUNTY



FORM

D-1

STATEMENT OF ORGANIZATION

PLEASE TYPE OR PRINT

THIS SPACE FOR OFFICE USE ONLY

FULL NAME AND COMPLETE MAILING ADDRESS
OF POLITICAL COMMITTEE

15th Ward United Republican Party
3744 W. 79th
Chicago, Ill. 60652

☐ CHECK IF ADDRESS CHANGE

IDENTIFICATION NUMBER

ACCT DIST

804

N

SEE ACCOMPANYING SHEET FOR INSTRUCTIONS

1 DATE STATEMENT
PREPARED

6-27-78

2 DATE COMMITTEE
CREATED

10-1-74

3 AMOUNT OF FUNDS AVAILABLE FOR CAMPAIGN EXPENDITURES
AS OF THE DATE THE COMMITTEE WAS CREATED \$4 IF THIS FORM IS USED TO AMEND PREVIOUS STATEMENT OF ORGANIZATION GIVE DATE THE LAST STATEMENT
WAS PREPARED 10-1-74

POLITICAL COMMITTEE'S AREA OF ACTIVITY SCOPE, AND PARTY AFFILIATION

A THIS IS ☒ A STATE POLITICAL COMMITTEE
☐ A LOCAL POLITICAL COMMITTEE☐ A STATE AND LOCAL POLITICAL COMMITTEE

B WILL THIS COMMITTEE OPERATE STATEWIDE?

C WILL THIS COMMITTEE OPERATE IN ONE COUNTY ONLY?

✓ YES, WHAT COUNTY?

D IF B AND C ABOVE ARE ANSWERED "NO" IN WHAT COUNTRY OR POLITICAL AREA WILL THE COMMITTEE
OPERATE?E THIS COMMITTEE WILL, PRIMARILY ☐ SUPPORT ☐ OPPOSE CANDIDATES FOR LOCAL OR STATE OFFICESF THIS COMMITTEE WILL ☐ SUPPORT ☐ OPPOSE QUESTIONS OF PUBLIC POLICY

G NAME OF POLITICAL PARTY COMMITTEE IS AFFILIATED WITH

5 THIS POLITICAL COMMITTEE

☐ IS A CONTINUING ORGANIZATION☐ IS NOT A CONTINUING ORGANIZATION

6 PURPOSE(S) OF THE POLITICAL COMMITTEE

8 COMMITTEE'S PRINCIPAL OFFICERS, INCLUDING CHAIRMAN, TREASURER, OFFICERS AND MEMBERS OF
FINANCE COMMITTEE (IF ANY)

NAME

ADDRESS

POSITION

Walter K. Kiltz

3744 W. 79th
Chicago, Ill 60652Chairman
Treasurer

804
 CANDIDATE(S) THE COMMITTEE IS SUPPORTING OR OPPOSING IF COMMITTEE IS SUPPORTING, GIVE PARTY LABEL, THEN
 only party name(s)

NAME	SUPPORT	OPPOSE	OFFICE	PARTY AFFILIATION

10. NAME, ADDRESS, AND POSITION OF EACH CUSTODIAN OF THE COMMITTEE'S BOOKS AND ACCOUNTS

NAME	ADDRESS	POSITION
Walter K. Kiltz	3794 W. 79th Chicago, Ill. 60652	CHAIRMAN & TREASURER

11. ALL BANKS OR OTHER FINANCIAL INSTITUTIONS, SAFETY DEPOSIT BOXES, AND ANY OTHER REPOSITORIES OF CUSTODIANS OF FUNDS USED BY THE COMMITTEE

NAME	ADDRESS

12. SPECIFIC DISPOSITION OF RESIDUAL FUNDS IN THE EVENT OF THE DISSOLUTION OR TERMINATION OF THE COMMITTEE

13. NAME OF POLITICAL COMMITTEE

DATE

VERIFICATION

I declare that this statement of organization (including any accompanying schedules and statements) has been prepared by me and to the best of my knowledge and belief is a true, correct and complete statement of organization as required by Article 9 of The Election Code. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$200 or imprisonment in a penal institution other than the penitentiary or both fine and imprisonment.

6-29-75
 DATE

Walter K. Kiltz
 SIGNATURE OF THE ASSESSOR
 OR CANDIDATE

STATE POLITICAL COMMITTEES
 OF ILLINOIS
 STATE AND COUNTY ELECTIONS
 1020 SOUTH SPRING STREET
 SPRINGFIELD, ILLINOIS 62764

LOCAL POLITICAL COMMITTEES
 OF ILLINOIS
 Register and County Clerk

STATE AND COUNTY POLITICAL
 COMMITTEES
 Board of Directors and Members
 appropriate County Clerk



FORM
D-1

STATEMENT OF ORGANIZATION
PLEASE TYPE OR PRINT IN BLACK INK

THIS SPACE FOR OFFICE USE ONLY

Full name and complete mailing address of Political Committee

23rd Ward Democratic Organization
William O. Lipinski, Committeeman
5838 S. Archer
Chicago, IL 60638

RECEIVED

FEB - 11

STATE BOARD OF ELECTIONS

☐ CHECK IF ADDRESS CHANGE

IDENTIFICATION NO.	AUDIT DIST.
805 -- 3	

SEE ACCOMPANYING SHEET FOR INSTRUCTIONS

1. Date Statement Prepared <u>1/23/78</u>	2. Date Committee Created _____	3. Amount of Funds Available for Campaign Expenditures As of the Date the Committee was Created \$ <u>THIS CANNOT EXCEED \$1000.00**</u>
--	------------------------------------	---

4. If this form is used to amend previous Statement of Organization give date the last statement was prepared. _____

5. Political Committee's Area of Activity, Scope, and Party Affiliation*

A-This is ☐ A State Political Committee

☐ A Local Political Committee

☐ A State and Local Political Committee

B-Will this committee operate statewide? No

C-Will this committee operate in one county only? Yes If yes, what county? Cook

D-If B and C above are answered "Yes," in what counties or political areas will the committee operate?

E-This committee will primarily ☒ Support ☐ Oppose candidates for local or state offices

F-This committee will ☒ Support ☐ Oppose questions of public policy

G-Name of political party committee is affiliated with Democratic

H-County of residence of candidate Cook

6. Purpose(s) of the Political Committee*

The purpose of the committee is to elect the candidates for public office endorsed by the organization and to support or oppose questions of public policy endorsed by the organization.

7. Committee's Principal Officers, including Chairman, Treasurer, Officers, and Members of Finance Committee (if any)*

Name	Address	Position
John McNary	5838 S. Archer Chicago, IL 60638	Treasurer
William O. Lipinski	5838 S. Archer Chicago, IL 60638	Committeeman

*If more space for information is required, please attach additional sheet.
**See Manual of Instructions.

93040963058

Name of Political Committee

Identification Number

23rd Ward Democratic Organization

BOC --

8. Candidate(s) the Committee is supporting or opposing (If Committee is supporting entire party ticket, show only party name)

Name	Support	Oppose	Office	Party Affiliated in
Democrat	X			

RECEIVED
FEB - 3 1968
STATE BOARD OF ELECTIONS

9. Name, address, and position of each custodian of the Committee's books and accounts

Name	Address	Position
John McNay	5838 S. Archer Chicago, IL 60638	Treasurer

10. All banks or other financial institutions, safety deposit boxes, and any other repositories of funds used by the Committee

Name	Address
American National Bank and Trust Company of Chicago	33 North LaSalle Street, Chicago, IL 60690

11. A full disposition of residual funds in the event of the dissolution or termination of the Committee. All funds remaining at dissolution or termination will be turned, prorate to all the contributors of the immediately preceding 12 month period of transferred to other political or charitable organizations consistent with the positions of the committee or the candidates it represented.

VERIFICATION

I declare that this Statement or Organizational Statement including any accompanying schedule and statement has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of Organization as required by Article 9 of THE ELECTION CODE. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$500 or imprisonment for a period not exceeding 6 months, or both fine and imprisonment.

John McNay
Treasurer

John McNay
Treasurer of Committee

The State Board of Elections is required to maintain a record of all statements and schedules filed with it. It is the duty of the filer to provide any information which may be required by the Board. The fee is \$1.00 per statement and schedule. The fee is to be paid to the State Board of Elections.

State Board of Elections
Return to
State Board of Elections
1120 North LaSalle Street
P.O. Box 4167
Springfield, Illinois 62702

Local Political Committee
Return to
Appropriate County Clerk

State and Local Political
Committee (Original to State
Board of Elections and copy to
appropriate County Clerk)

93040983059

MUR # 3479

ADDITIONAL DOCUMENTS WILL BE ADDED TO THIS FILE AS THEY
BECOME AVAILABLE. PLEASE CHECK FOR ADDITIONAL MICROFILM
LOCATIONS.

93040983060



FEDERAL ELECTION COMMISSION
WASHINGTON DC 20461

THIS IS THE End of MUR# 3479

DATE FILMED 10/27/93 CAMERA NO. 2

CAMERAMAN MC

93040983061



FEDERAL ELECTION COMMISSION
WASHINGTON DC 20463

☒ Microfilm
☐ Public Records
☐ Press

THE FOLLOWING DOCUMENTATION IS ADDED TO

THE PUBLIC RECORD IN CLOSED MUR 3479.

12/10/93

93043542661

THE READER IS REFERRED TO ADDITIONAL MICROFILM LOCATIONS
FOR THE FOLLOWING DOCUMENTS PERTINENT TO THIS CASE

1. Memo, General Counsel to the Commission, dated September 22, 1992, Subject: Priority System Report.
See Reel 354, pages 1590-94.
2. Memo, General Counsel to the Commission, dated April 14, 1993, Subject: Enforcement Priority System.
See Reel 354, pages 1595-1620.
3. Certification of Commission vote, dated April 28, 1993.
See Reel 354, pages 1621-22.
4. General Counsel's Report, In the Matter of Enforcement Priority, dated December 3, 1993.
See Reel 354, pages 1623-1740.
5. Certification of Commission vote, dated December 9, 1993.
See Reel 354, pages 1741-1746.

93043542662



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

DEC 10 1992

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Martin A. Russo
17200 South Kimbark
South Holland, IL 60473

RE: MUR 3479

Dear Mr. Russo:

On March 3, 1992, the Federal Election Commission received your complaint alleging certain violations of the Federal Election Campaign Act of 1971, as amended ("the Act").

After considering the circumstances of this matter, the Commission has determined to exercise its prosecutorial discretion and to take no action against the Lipinski for Congress Committee and John Mooney, as treasurer and the Honorable William O. Lipinski. See attached narrative. Accordingly, the Commission closed its file in this matter. This matter will become part of the public record within 30 days.

The Act allows a complainant to seek judicial review of the Commission's dismissal of this action. See 2 U.S.C. § 437g(a)(9).

Sincerely,

Dawn M. Odrowski

Dawn M. Odrowski
Attorney

Attachment
Narrative

Date the Commission voted to close the file:

DEC 09 1992

93043542663

MUR 3479

LIPINSKI FOR CONGRESS COMMITTEE

Martin J. Russo, Congressman's Lipinski's opponent in the March 1992 Illinois primary, filed this complaint alleging that Congressman Lipinski and the Committee used funds from an undisclosed bank account to finance Mr. Lipinski's federal campaigns. The complaint also suggests the account was connected to Mr. Lipinski's local political activities. In response, the Committee filed an amended Statement of Organization listing the undisclosed account and maintained it had reported all account activity in reports filed with the Commission. Committee reports appear to support this. There is no evidence in the complaint that the undisclosed account contained impermissible funds from Mr. Lipinski's local political activities.

This case raises no significant issues relative to the other issues pending before the Commission, does not appear to involve substantial amounts of money, and no serious intent to violate the FECA is evident. Moreover, this case had limited impact on the process.

93043542664



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

DEC 10 1992

The Honorable William O. Lipinski
House of Representatives
1501 Longworth House Office Building
Washington, DC 20515

RE: MUR 3479
The Honorable William O. Lipinski

Dear Mr. Lipinski:

On March 9, 1992, the Federal Election Commission notified you of a complaint alleging certain violations of the Federal Election Campaign Act of 1971, as amended. A copy of the complaint was enclosed with that notification.

After considering the circumstances of this matter, the Commission has determined to exercise its prosecutorial discretion and to take no action against you. See attached narrative. Accordingly, the Commission closed its file in this matter.

The confidentiality provisions of 2 U.S.C. § 437g(a)(12) no longer apply and this matter is now public. In addition, although the complete file must be placed on the public record within 30 days, this could occur at any time following certification of the Commission's vote. If you wish to submit any factual or legal materials to appear on the public record, please do so as soon as possible. While the file may be placed on the public record prior to receipt of your additional materials, any permissible submissions will be added to the public record when received.

If you have any questions, please contact me at (202) 219-3400.

Sincerely,

Dawn M. Odrowski

Dawn M. Odrowski
Attorney

Attachment
Narrative

Date the Commission voted to close the file: DEC 09 1992

93043542665

MUR 3479

LIPINSKI FOR CONGRESS COMMITTEE

Martin J. Russo, Congressman's Lipinski's opponent in the March 1992 Illinois primary, filed this complaint alleging that Congressman Lipinski and the Committee used funds from an undisclosed bank account to finance Mr. Lipinski's federal campaigns. The complaint also suggests the account was connected to Mr. Lipinski's local political activities. In response, the Committee filed an amended Statement of Organization listing the undisclosed account and maintained it had reported all account activity in reports filed with the Commission. Committee reports appear to support this. There is no evidence in the complaint that the undisclosed account contained impermissible funds from Mr. Lipinski's local political activities.

This case raises no significant issues relative to the other issues pending before the Commission, does not appear to involve substantial amounts of money, and no serious intent to violate the FECA is evident. Moreover, this case had limited impact on the process.

93043542666



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

DEC 16 1993

Dennis G. Kenney
115 N. Oak Park Avenue
Oak Park, IL 60301

RE: MUR 3479
Lipinski for Congress Committee and
John Mooney, as treasurer

Dear Mr. Kenney:

On March 9, 1992, the Federal Election Commission notified the Lipinski for Congress Committee and John Mooney, as treasurer, of a complaint alleging certain violations of the Federal Election Campaign Act of 1971, as amended. A copy of the complaint was enclosed with that notification.

After considering the circumstances of this matter, the Commission has determined to exercise its prosecutorial discretion and to take no action against the Lipinski for Congress Committee and John Mooney, as treasurer. See attached narrative. Accordingly, the Commission closed its file in this matter.

The confidentiality provisions of 2 U.S.C. § 437g(a)(12) no longer apply and this matter is now public. In addition, although the complete file must be placed on the public record within 30 days, this could occur at any time following certification of the Commission's vote. If you wish to submit any factual or legal materials to appear on the public record, please do so as soon as possible. While the file may be placed on the public record prior to receipt of your additional materials, any permissible submissions will be added to the public record when received.

If you have any questions, please contact me at (202) 219-3400.

Sincerely,

Dawn M. Odrowski

Dawn M. Odrowski
Attorney

Attachment
Narrative

Date the Commission voted to close the file:

DEC 9 9 1993

93043542667

MUR 3479

LIPINSKI FOR CONGRESS COMMITTEE

Martin J. Russo, Congressman's Lipinski's opponent in the March 1992 Illinois primary, filed this complaint alleging that Congressman Lipinski and the Committee used funds from an undisclosed bank account to finance Mr. Lipinski's federal campaigns. The complaint also suggests the account was connected to Mr. Lipinski's local political activities. In response, the Committee filed an amended Statement of Organization listing the undisclosed account and maintained it had reported all account activity in reports filed with the Commission. Committee reports appear to support this. There is no evidence in the complaint that the undisclosed account contained impermissible funds from Mr. Lipinski's local political activities.

This case raises no significant issues relative to the other issues pending before the Commission, does not appear to involve substantial amounts of money, and no serious intent to violate the FECA is evident. Moreover, this case had limited impact on the process.

93043542668