



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
PROGRESSIVE CHOICES PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		24065.36
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	35802.02									
(c) Total Receipts (from Line 19) .....	42000.00	75797.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	77802.02	99862.66								
7. Total Disbursements (from Line 31) .....	35353.23	57413.87								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	42448.79	42448.79								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
PROGRESSIVE CHOICES PAC

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	14500.00	44647.30
(i) Itemized (use Schedule A) .....	0.00	2650.00
(ii) Unitemized .....	14500.00	47297.30
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	27500.00	28500.00
(c) Other Political Committees (such as PACs) .....	42000.00	75797.30
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	42000.00	75797.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	42000.00	75797.30

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	353.23	4413.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	353.23	4413.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	53000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35353.23	57413.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35353.23	57413.87

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	42000.00	75797.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	42000.00	75797.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	353.23	4413.87
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	353.23	4413.87

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Brian Bates	Date of Receipt MM / DD / YYYY 06 / 27 / 2008
	Mailing Address 1225 West Eddy Street	<b>Transaction ID:</b> SA11AI.4580
	City State Zip Code Chicago IL 60657	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Morrison Foerster	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Cuneo Gilbert & LaDuca	Date of Receipt MM / DD / YYYY 06 / 18 / 2008
	Mailing Address 507 C Street NE	<b>Transaction ID:</b> SA11AI.4574
	City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jonathan Cuneo	Date of Receipt MM / DD / YYYY 06 / 18 / 2008
	Mailing Address 507 C Street NE	<b>Transaction ID:</b> SA11AI.4574.0
	City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Cuneo Gilbert & LaDuca	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 20  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**PROGRESSIVE CHOICES PAC**

**A.** Full Name (Last, First, Middle Initial)  
Charles LaDuca

Mailing Address 507 C Street NE

City Washington State DC Zip Code 20002

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

Name of Employer Cuneo Gilbert & LaDuca, LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY  
06 / 18 / 2008

**Transaction ID:** SA11AI.4574.2

Amount of Each Receipt this Period 300.00

**[MEMO ITEM]**

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

Mailing Address 2150 N. Lincoln Park West, Apt. 40

City Chicago State IL Zip Code 60614

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

Name of Employer KF and HG Montgomery Foundation Occupation Director

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
06 / 27 / 2008

**Transaction ID:** SA11AI.4582

Amount of Each Receipt this Period 1000.00

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

Mailing Address 5348 N. Lakewood Avenue

City Chicago State IL Zip Code 60640

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

Name of Employer IL Birth to Five PAC Occupation Director

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
06 / 18 / 2008

**Transaction ID:** SA11AI.4572

Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 6000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 20	
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Heather Steans		Date of Receipt	
	Mailing Address 5348 N. Lakewood Avenue		M M / D D / Y Y Y Y 06 / 18 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4571
	Chicago	IL	60640	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		5000.00	
Name of Employer State of Illinois		Occupation State Senator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	14500.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 20  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PROGRESSIVE CHOICES PAC**

**A.** Full Name (Last, First, Middle Initial)  
American Association for Justice PAC

Mailing Address 1050 31st Street, NW

City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20007</b>
---------------------------	--------------------	--------------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt  

M M / D D / Y Y Y Y Y
06 / 27 / 2008

**Transaction ID: SA11C.4596**  
 Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
American Optometric Association PAC

Mailing Address 1505 Prince Street, #300

City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>
---------------------------	--------------------	--------------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  

M M / D D / Y Y Y Y Y
06 / 18 / 2008

**Transaction ID: SA11C.4585**  
 Amount of Each Receipt this Period  
**5000.00**

**C.** Full Name (Last, First, Middle Initial)  
American Resort Development Association (ARDA ROC-PAC)

Mailing Address 1201 15th Street NW, Suite 400

City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005</b>
---------------------------	--------------------	--------------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  

M M / D D / Y Y Y Y Y
06 / 27 / 2008

**Transaction ID: SA11C.4590**  
 Amount of Each Receipt this Period  
**5000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>12500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 10 / 20  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

**A.** Full Name (Last, First, Middle Initial)  
Chicago Board Options Exchange PAC

Mailing Address 400 S. LaSalle Street

City State Zip Code  
Chicago IL 60605

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 7 / 2 0 0 8

**Transaction ID:** SA11C.4595

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
CME Group, Inc. PAC (CME/CBOT PAC)

Mailing Address 20 South Wacker Drive

City State Zip Code  
Chicago IL 60606

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8

**Transaction ID:** SA11C.4598

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Commerce Bancorp Inc. PAC

Mailing Address 1701 Rt. 70 E.

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 1 8 / 2 0 0 8

**Transaction ID:** SA11C.4584

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 20  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

**A.** Full Name (Last, First, Middle Initial)  
National Association of Realtors PAC

Mailing Address 430 North Michigan Avenue

City State Zip Code  
Chicago IL 60611

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 7 / 2 0 0 8

**Transaction ID:** SA11C.4593

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
United Auto Workers V-CAP

Mailing Address 8000 East Jefferson Avenue

City State Zip Code  
Detroit MI 48214

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 7 / 2 0 0 8

**Transaction ID:** SA11C.4588

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
United Food and Commercial Workers ABC

Mailing Address 1775 K Street N.W.

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 7 / 2 0 0 8

**Transaction ID:** SA11C.4592

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 20	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

**A.**

Full Name (Last, First, Middle Initial) United Pilots PAC		Date of Receipt
Mailing Address 9550 W. Higgins Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 6 / 1 8 / 2 0 0 8
City	State	Zip Code
Rosemont	IL	60018
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4587
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text"/> 2000.00
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 2000.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 27500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 13 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

A.

Full Name (Last, First, Middle Initial)  
AT&T

Transaction ID: SB21B.4530  
Date of Disbursement

Mailing Address P.O. Box 27-866

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

City State Zip Code  
Kansas City MO 64184

Amount of Each Disbursement this Period

53.23
-------

Purpose of Disbursement  
Telephone

--

Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Broadway 55 LLC

Transaction ID: SB21B.4568  
Date of Disbursement

Mailing Address 36 W. Rudolf #800

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

City State Zip Code  
Chicago IL 60601

Amount of Each Disbursement this Period

300.00
--------

Purpose of Disbursement  
Office Rent

--

Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

353.23
--------

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

353.23
--------

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) BILL FOSTER FOR CONGRESS COMMITTEE</p> <p>Mailing Address PO Box 703</p> <p>City Geneva State IL Zip Code 60134</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name G. WILLIAM (BIL FOSTER)</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4563</p> <p>Date of Disbursement 06 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) BOCCIERI FOR CONGRESS</p> <p>Mailing Address PO BOX 3016</p> <p>City ALLIANCE State OH Zip Code 44601</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name JOHN A BOCCIERI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4532</p> <p>Date of Disbursement 06 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) BRIGHT FOR CONGRESS.COM</p> <p>Mailing Address PO BOX 2106</p> <p>City MONTGOMERY State AL Zip Code 36102</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name BOBBY NEAL SR BRIGHT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4556</p> <p>Date of Disbursement 06 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>3000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

A.	Full Name (Last, First, Middle Initial) DAN SEALS FOR CONGRESS	Transaction ID: SB23.4552 Date of Disbursement
	Mailing Address P.O. Box 584	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City Wilmette State IL Zip Code 60091	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name DANIEL J SEALS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IL District: 10	

B.	Full Name (Last, First, Middle Initial) DARCY BURNER FOR CONGRESS	Transaction ID: SB23.4555 Date of Disbursement
	Mailing Address 603 Stewart Street #819	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City Seattle State WA Zip Code 98101	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name DARCY BURNER	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: WA District: 08	

C.	Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Transaction ID: SB23.4557 Date of Disbursement
	Mailing Address 430 South Capitol Street SE 2nd Floor	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="15000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="17000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

**A.** Full Name (Last, First, Middle Initial)  
DONALD CRAVINS JR FOR CONGRESS

Mailing Address PO BOX 2507

City OPELOUSAS State LA Zip Code 70570

Purpose of Disbursement  
Contribution

Candidate Name  
DONALD R JR CRAVINS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: LA District: 07

Transaction ID: SB23.4566

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF GLENN NYE

Mailing Address PO BOX 68444

City VIRGINIA BEACH State VA Zip Code 23471

Purpose of Disbursement  
Contribution

Candidate Name  
GLENN CARLYLE III NYE

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: VA District: 02

Transaction ID: SB23.4564

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JOHN BARROW

Mailing Address PO Box 8166

City Savannah State GA Zip Code 31412

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN J BARROW

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: GA District: 12

Transaction ID: SB23.4569

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF SCOTT HARPER</p> <p>Mailing Address 5829 DEARBORN PKWY</p> <p>City DOWNERS GROVE State IL Zip Code 60516</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name SCOTT HARPER Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4559 <b>Date of Disbursement</b> 06 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) HALVORSON FOR CONGRESS</p> <p>Mailing Address PO BOX 176</p> <p>City CRETE State IL Zip Code 60417</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name DEBBIE HALVORSON Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4551 <b>Date of Disbursement</b> 06 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JENNINGS 2008</p> <p>Mailing Address PO Box 49136</p> <p>City Sarasota State FL Zip Code 34230</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name CHRISTINE JENNINGS Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4558 <b>Date of Disbursement</b> 06 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

A.	Full Name (Last, First, Middle Initial) JIM HIMES FOR CONGRESS	Transaction ID: SB23.4542 Date of Disbursement
	Mailing Address 65 HIGH RIDGE ROAD BOX 456	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City STAMFORD State CT Zip Code 06905	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name JIM HIMES	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KAY FOR CONGRESS	Transaction ID: SB23.4554 Date of Disbursement
	Mailing Address PO BOX 14194	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City PARKVILLE State MO Zip Code 64152	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name KAY BARNES	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KIRKPATRICK FOR ARIZONA	Transaction ID: SB23.4549 Date of Disbursement
	Mailing Address PO Box G	<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City Flagstaff State AZ Zip Code 86002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name ANN KIRKPATRICK	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

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

Mailing Address 2525 N BAKER DR

City State Zip Code  
CANBY OR 97013

Purpose of Disbursement  
Contribution

Candidate Name  
KURT SCHRADER

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OR District: 05

Transaction ID: SB23.4539

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
LINDA STENDER FOR CONGRESS

Mailing Address P.O. Box 730

City State Zip Code  
Scotch Plains NJ 07076

Purpose of Disbursement  
Contribution

Candidate Name  
LINDA STENDER

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NJ District: 07

Transaction ID: SB23.4553

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
MADIA FOR U S CONGRESS

Mailing Address P.O. Box 2459

City State Zip Code  
Maple Grove MN 55311

Purpose of Disbursement  
Contribution

Candidate Name  
JIGAR ASHWIN MADIA

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MN District: 03

Transaction ID: SB23.4533

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PROGRESSIVE CHOICES PAC

A.

Full Name (Last, First, Middle Initial)  
MARKEY FOR CONGRESS

Transaction ID: SB23.4547  
Date of Disbursement

Mailing Address PO Box 1333

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	8

City State Zip Code  
Fort Collins CO 80521

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name  
ELIZABETH HELEN MARKEY

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: CO District: 04

B.

Full Name (Last, First, Middle Initial)  
MCMAHON FOR CONGRESS

Transaction ID: SB23.4537  
Date of Disbursement

Mailing Address 66 ARNOLD STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	8

City State Zip Code  
STATEN ISLAND NY 10301

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name  
MICHAEL E MCMAHON

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

C.

Full Name (Last, First, Middle Initial)  
TITUS FOR CONGRESS

Transaction ID: SB23.4535  
Date of Disbursement

Mailing Address 1637 TRAVOIS CIRCLE

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	8

City State Zip Code  
LAS VEGAS NV 89119

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name  
DINA TITUS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NV District: 03

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

3000.00
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**TOTAL** This Period (last page this line number only) .....

35000.00
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