FE5AN018

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

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Office Use Only

NAME OF COMMITTEE (in full)	TYPE OR PRIN		Example: If typing, type over the lines.	TEC MA 12FE4M5	IL CENTER
Ruscitti	for Cor	gress			
ADDRESS (number and stree Check if different than previously reported. (ACC) FEC IDENTIFICATION C 0 0 5 0 3	B / 0 0 , r	, , ,	× NEW (N) OR	STATE AMENDED (A)	ZIP CODE A STATE V DISTRICT
July 15 Quarte October 15 Qu	erly Report (Q1) erly Report (Q2) uarterly Report (Q3) ar-End Report (YE)	Election	OST-Election Report for General (30G)	General (12G) Special (12S)	Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period I certify that I have examine Type or Print Name of Trea		to the best of my		is true, correct and cor	
Signature of Treasurer	Lue .	S. H	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Date 5 f /	30 / 20 / W
Office Use Only	erroneous, or incomp	olete information m	ay subject the person sig	, F	enalties of 2 U.S.C. §437g. FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Page 2

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name Congress

Report Covering the Period:

10'08'20'i To: 12"'31'20'i

-		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	, 4,475.00	, 4,475.00
	(b) Total Contribution Refunds (from Line 20(d))	, , 0.—	, , 0.
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	, 4,475.00	, 4,475.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (frem Line 17)	, 1,166.92	, 1,166.92
	(b) Total Offsets to Operating Expenditures (from Line 14)	, , 0. –	, , 0.
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	, 1,166.92	, 1,166.92
8.	Cash on Hand at Close of Reporting Period (from Line 27)	, 3,308.08	•
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, , 0.—	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schodule C and/or Schedule D)	, , 0. —	

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 I	
DETAILED SUMMARY I	PALIE

of Receipts

Page 3

FEC Form 3 (Revised 12/2003) Write or Type Committee Name

Ruscitti For Congress

Report Covering the Period:

From:

10'08'20|| To: [2'31'20'||

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	, 3,750.°°	
	(ii) Uniternized(iii) TOTAL of contributions	, ,225.°°	, ,225.00
	from individuals	, 3,97 <i>5.°°</i>	<u> </u>
	(b) Political Party Committees(c) Other Political Committees	, , O.°°	, , O.ººº
	(such as PACs)	, , <i>O.</i> ° °	, , O.°°
	(d) The Candidate	, ,500. <u>°°</u>	, ,500.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	, 4,475.°°	, 4,47 <i>5.°°</i>
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	, , 0	, , O.°°
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	, , 0. 0.	, , ,
	(b) All Other Loans(c) TOTAL LOANS	, , 0. ••	•
	(add Lines 13(a) and (b))	, , 0.00	· , , 0.00
14.	OFFSETS TO OPERATING EXPENDITURES		
	(Refunds, Rebates, etc.)	, , O. <u>° °</u>	· , , 0. · ·
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	, , 0.00	, , O. - °
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	, 4,475.°°	, 4,475.00

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	, 1,166.92	, 1,166.92
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	, , 0.—	, , 0. –
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed	a .	0 -
	by the Candidate	, , 0.	, , 0. —
	(b) Of All Other Loans	0 -	0.—
	(c) TOTAL LOAN REPAYMENTS	, , .	, , .
	(add Lines 19(a) and (b))	, 0. –	, , <i>o</i> .—
		, , ,	•
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other	0 —	Λ <u> —</u>
	Than Political Committees	, , <i>O</i> .	$,$ α
	(b) Political Party Committees	0. ~	
	(c) Other Political Committees	, , ,	, , ,
	(such as PACs)	, <u>0</u> . —	0 —
	(, , ,	, , .
	(d) TOTAL CONTRIBUTION REFUNDS	^ —	1
	(add Lines 20(a), (b), and (c))	, , , , ,	, , <u>O</u>
21.	OTHER DISBURSEMENTS	, o. —	, , o.—
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	, 1,166.92	, 1,166.92
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	ITING PERIOD	, , Q. <u>03</u>
24	TOTAL RECEIPTS THIS PERIOD (from Line 1	6, page 3)	, 4,475.00
25.	SUBTOTAL (add Line 23 and Line 24)		, 4,475. <u>00</u>
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	n Line 22)	, 1,166. ⁹² , 3,308.°8
27.	CASH ON HAND AT CLOSE OF REPORTING	PERIOD	2 3 0 8 0 8

SCHEDULE A (FEC Form 3)

PAGE / OF 2 FOR LINE NUMBER: Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and a		
NAME OF COMMITTEE (In Full) Rusci Hi	for Congress	
Henry Gwen S. Mailing Address 105 W Elm St City State	Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Occupation	Treasurer	Amount of Each Receipt this Period
Primary General Other (specify)	ycle-to-Date	
Full Name (Last, First, Middle Initial) Coladio18 tro, Franco A. Mailing Address 157 Cardnial Pr City State Blooming dal2 IL	Zip Code 60108	Date of Receipt Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Amari + Locallo Occupation		Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Jorgensen, Richard A, Mailing Address 1028 Gary C+ City State	Zip Code	Date of Receipt
Wheren IL FEC ID number of contributing federal political committee. C Name of Employer Retiral	GO187	Amount of Each Receipt this Period
	, 1,0 0 0.00	
SUBTOTAL of Receipts This Page (optional)		, ,
TOTAL This Period (last page this line number only)		, ,

SCHEDUL	EΑ	(FEC	Form	3)
ITEMIZED	REC	EIPTS	3	

PAGE OF FOR LINE NUMBER: Use separate schedule(s) (check only one) **河**11a for each category of the 11b 11c l 11d **Detailed Surgmary Page** 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) Ruscitti for Congress Full Name (Last, First, Middle Initial) Gidwitz Date of Receipt Mailing Address 10'28'žà i i Sulte 4000 Zip Code 60606 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1,000000 Name of Employer
GCG Partners Occupation Partner Receipt For: Election Cycle-to-Date Primary General 1,000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: **Election Cycle-to-Date Primary** General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) , SUBTOTAL of Receipts This Page (optional).....

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

	ITEMIZED RECEIPTS		for each category of the	check only one)
			Detailed Summary Page	12 13a 13b 14 15
	An or	ny information copied from such Reports and Statem for commercial purposes, other than using the name	son for the purpose of soliciting contributions o salicit cantributions from such committee.	
		NAME OF COMMITTEE (In Full)		
	A.	City	N+ A ate Zip Code CL 60103	Date of Receipt
		FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
074006		Name of Employer State of Tilinois Receipt For: Primary General Other (specify)	upation chool Superintendent tion Cycle-to-Date , 500	, , , , , , , , , , , , , , , , , , , ,
2 0 8	_	Full Name (Last, First, Middle Initial)		Date of Receipt
id VI B	B.	Mailing Address		M M / D D / Y Y Y
		City	ate Zip Code	
		FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
		Name of Employer Occ	upation	, ,
		Receipt For: Primary General Other (specify)	ction Cycle-to-Date	
	_	Full Name (Last, First, Middle Initial)		Date of Receipt
	C.	Mailing Address		M M / D D / Y Y Y
		City	ate Zip Code	
•		FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
•		Name of Employer Occ	upatien	, ,
		Receipt For: Electric Primary General Other (specify)	ction Cycle-to-Date	
		SUBTOTAL of Receipts This Page (optional)		, ,500.°°

PAGE

OF

FOR LINE NUMBER:

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

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) for each category of the 17 19b 18 19a **Detailed Summary Page** 20a 20b 20c 21 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) Ruscitti for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Zip Code 60613 State Amount of Each Disbursement this Period ,200,00 Purpose of Disbursement DOI Candidate Name Category/ Type Disbursement For: Office Sought: House Primary General Senate Other (specify) President State: District: Full Name (Last, First, Middle Initial) Goodman Date of Disbursement 70 18 2011 Zip Code State Amount of Each Disbursement this Period 60018 , 81,33 Purpose of Disbursemen Candidate Name Category/ Type Office Sought: House Disbursement For: Primary Senate General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. 7 0 25 2011 Mailing Address State Zip Code Amount of Each Disbursement this Period 60517 , 17.50 Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate **Primary** General Other (specify) President State: District: SUBTOTAL of Disbursements This Page (optional).....

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

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS Any information copied from such Reports and Statements m		
or for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Fulf) Ruscitti for		tee to.solicit.contributions from such committee.
Full Name (Last, First, Middle Initial) A. ATAT Mobility Mailing Address O Box 6416 City Carol Streem Purpose of Disbursement Phone Expens? Candidate Name Office Sought: House Senate Primary President Other (s	General	Date of Disbursement M M O 3 ' 2 O 1 1 Amount of Each Disbursement this Period , , 61.22
Full Name (Last, First, Middle Initial) B. ATTT Mobility Mailing Address PO BOX 6416 City State Carol STRESM TLL Purpose of Disbursement Phone Expense Candidate Name Office Sought: House Disbursement For Senate Primary President District:	General	Date of Disbursement 1
Full Name (Last, First, Middle Initial) C. Lucca Alla Moda Mailing Address 313 Elson St City Parar Grove FL Purpose of Disbursement Web Pests A Candidate Name Office Sought: House Primary President Primary Other (s	General	Date of Disbursement 1
SUBTOTAL of Disbursements This Page (optional)		

SCHEDULE	В	(FEC	Form	3)
ITEMIZED D	DISE	BURSI	EMEN'	rs

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Suramary Page	FOR LINE NUMBER: PAGE 3 OF 7 (check only one) 17 18 19a 19b 20a 20b 20c 21
Any information copied from such Reports and Statements in or for commercial purposes, other than using the name and. NAME OF COMMITTEE (In Full) Ruscitt		
Full Name (Last, First, Middle Initial) A. Staples Mailing Address 525 W. Arm, Tran City Blooming date Purpose of Disbursement Office Sought: House Disbursement Formary President Other (s	Zip Code G O (0 8 Category, Type r:	Date of Disbursement M M / 23 / 20 1 / Amount of Each Disbursement this Period , , 67. 97
State: District: Full Name (Last, First, Middle Initial) B. US Post Office Mailing Address 108 W Schick RJ City Blooming date Purpose of Disbursement PO Box Candidate Name Office Sought: House Senate Disbursement Fo	Zip Code 60108 Category, Type	Date of Disbursement M M ' 2 3 ' 2 8 1 1 Amount of Each Disbursement this Period , , 37.
Purpose of Disbursement Purchase Name Candidate Name Office Sought: House Disbursement Fo Senate Primary		Date of Disbursement M M M M M M M M M M M M M M M M M M M
SUBTOTAL of Disbursements This Page (optional)		_ , , .

SCHEDULE B	(FEC Form 3)
ITEMIZED DIS	BURSEMENTS

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4 OF 4 (check only one)
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 commarcial purposes, other than using the name and address of any political committee to solicit contributions from such committee.		
NAME OF COMMITTEE (IR Full) Ruscitt for Coa		
Full Name (Last, First, Middle Initial) A. Dufasz County Election Commission Mailing Address 421 North County Farm Road City State Zip Code Zip Code		Date of Disbursement
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name Category/ Type		·
Office Sought: House Disbursement For Senate Primary President Other (s	General	
Full Name (Last, First, Middle Initial) B. Fell Ex Offic? Mailing Address 3 69 WArmy Trail Rd City State Zip Code		Date of Disbursement
Blooming dal? IL Purpose of Disbursement	Zip Code	Amount of Each Disbursement this Period
Candidate Name	Category Type	
Office Sought: House Disbursement For Senate Primary Other (s	General	
Full Name (Last, First, Middle Initial) C. Q5(1)		Date of Disbursement
Mailing Address 53 Lake Morton City State Zip Code Fig 33801		Amount of Each Disbursement this Period
Purpose of Disbursement Merchant fees for online CC Candidate Name Category/ Type		, 108.05
Office Sought: House Disbursement For Senate Primary Other (s	General	
SUBTOTAL of Disbursements This Page (optional)		_
TOTAL This Period (last page this line number only)		, 1,166.92

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