Image# 14978194067					PAGE 1 / 39
	PORT OF R D DISBURS Other Than An Autho	EMENT	S	Office	e Use Only
1. NAME OF TYP COMMITTEE (in full)	e or print 🔻	Example: If typir over the lines.	ng, type 1	L2FE4M5	
DuPage Medical Group L					
ADDRESS (number and street)	00 West 31ST Street				
Check if different	uite 300				
them musicusly	owners Grove			IL 60	515
2. FEC IDENTIFICATION NUMB	ER V CITY	•	ST		ZIP CODE
C C00435982	3. IS T REP		IEW N) <b>OR</b>	AMENDE (A)	ED
<ul> <li>4. TYPE OF REPORT (Choose One)</li> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly Report (Q1)</li> <li>July 15 Quarterly Report (Q2)</li> <li>October 15 Quarterly Report (Q3)</li> <li>January 31 Year-End Report (YE)</li> <li>July 31 Mid-Year Report (Non-election Year Only) (MY)</li> <li>Termination Report (TER)</li> </ul>	b) Monthly Report Due On: Mar 20 Apr 20 (c) 12-Day PRE-Election Report for the: (d) 30-Day POST-Election Report for the: Election of the: Electi	(M3) (M4) Primary (12P Convention ( On General (30C	12C)	Aug 20 (M Sep 20 (M Cot 20 (M General (12G) Special (12S)	9) Dec 20 (M12) (Non-Election Year Only) (Non-Election Year Only)
5. Covering Period 09	01 / Y Y Y Y 01 2014	through	09 /	30	2014 plete.
Type or Print Name of Treasurer <u>M</u>	lichael K. McCormick				
Signature of Treasurer	McCormick	[Electronically	<i>Filed]</i> Dat	te 10	14 Y Y Y Y 2014
NOTE: Submission of false, erroneous,	or incomplete information m	nay subject the pers	son signing this	Report to the pen	alties of 2 U.S.C. §437g.
Office Use Only				FE	EC FORM 3X Rev. 12/2004

10/14/2014 13 : 48

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	O FEC Form 3X (Rev. 02/2003)	F RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
١	Write or Type Committee Name		
_	DuPage Medical Group LTD PAC		
F	Report Covering the Period: From: 09		o: 09 30 / Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		174940.53
	(b) Cash on Hand at Beginning of Reporting Period	189092.10	
	(c) Total Receipts (from Line 19)	3030.40	31681.97
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	192122.50	206622.50
7.	Total Disbursements (from Line 31)	7500.00	22000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	184622.50	184622.50
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Page 3

# DuPage Medical Group LTD PAC

	COLUMN A	COLUMN B		
I. Receipts	ipts Total This Period			
. Contributions (other than loans) From:	L.			
(a) Individuals/Persons Other				
Than Political Committees				
(i) Itemized (use Schedule A)	2990.40	21248.75		
(ii) Unitemized	, 40.00	10433.22		
(iii) TOTAL (add				
Lines 11(a)(i) and (ii)	3030.40	31681.97		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00			
(such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry	0000.40	31681.97		
Totals to Line 33, page 5)	3030.40	51001.97		
2. Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
	0.00	0.00		
3. All Loans Received	0.00	0.00		
4. Loan Repayments Received	0.00	0.00		
5. Offsets To Operating Expenditures		,		
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
6. Refunds of Contributions Made	,			
to Federal Candidates and Other				
Political Committees	0.00	0.00		
7. Other Federal Receipts	, , , , , , , , , , , , , , , , , , , ,			
(Dividends, Interest, etc.)	0.00	0.00		
<ol><li>Transfers from Non-Federal and Levin Funds</li></ol>		7		
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
9. Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))	3030.40	31681.97		
	7			
. Total Federal Receipts				

# DETAILED SUMMARY PAGE

II. Disbursements	COLUMN A Total This Period	COLUMN B
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date
(i) Federal Share	0.00	0.0
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	0.00	
<ul><li>(c) Total Operating Expenditures</li></ul>	0.00	0.0
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.0
Transfers to Affiliated/Other Party Committees	0.00	0.0
Contributions to Federal Candidates/Committees and Other Political Committees	5000.00	7000.00
Independent Expenditures	0.00	0.0
(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d))		
(use Schedule F)	0.00	0.0
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.0
(b) Political Party Committees	0.00	0.0
(c) Other Political Committees (such as PACs)	0.00	0.0
<ul><li>(d) Total Contribution Refunds</li><li>(add Lines 28(a), (b), and (c))</li></ul>	0.00	0.0
Other Disbursements	2500.00	15000.0
Federal Election Activity (2 U.S.C. §431(20)		
(a) Allocated Federal Election Activity	<i>''</i>	
(from Schedule H6) (i) Federal Share	0.00	0.00
<ul><li>(ii) "Levin" Share</li><li>(b) Federal Election Activity Paid Entirely</li></ul>	0.00	0.0
With Federal Funds	0.00	0.0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ►	. 0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7500.00	22000.0
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	7500.00	20000.00
from Line 31)	7500.00	22000.00

L

# DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	3030.40	31681.97	
<ol> <li>Total Contribution Refunds (from Line 28(d))</li> </ol>	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3030.40	31681.97	
<ul> <li>Total Federal Operating Expenditures</li> <li>(add Line 21(a)(i) and Line 21(b))</li> </ul>	0.00	0.00	
<ul> <li>Offsets to Operating Expenditures (from Line 15, page 3)</li> </ul>	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c	12	17
Any information copied from such Repor or for commercial purposes, other than				for the		rpose (	of solicitin	ig contrib	utions
NAME OF COMMITTEE (In Full) DuPage Medical Group L	TD PAC								
Full Name (Last, First, Middle Initial)         Craig Anderson         Mailing Address 3 Briar Ln         City         West Chicago         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60185-3033 Year-to-Date ▼ 416.80			sac	tion ID	2	his Perio	46A590B5
B. Full Name (Last, First, Middle Initial) Mailing Address 3 Briar Ln				Date o	of R	· ·	D / 7	_2014	Ý
City West Chicago FEC ID number of contributing	State IL	Zip Code 60185-3033		Trans		tion ID	: 270737 Receipt t	FC33424 his Perio	
federal political committee. Name of Employer DuPage Medical Group, Ltd.	Occupation Physician					7	5		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.80	]						
Full Name (Last, First, Middle Initial) C. Marc Asselmeier				Date o	of R	eceipt			
	Mailing Address 750 Brentwood Ct						2	2014	
City Glen Ellyn	State IL	Zip Code 60137-6365					Receipt t		<b>4738B244</b> d
FEC ID number of contributing federal political committee.	ů – Elektrik								39.00
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician								
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 780.00	]						
SUBTOTAL of Receipts This Page (opt	ional)					9		8	0.68

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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TTEMIZED RECEIPTS			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
				erson for the purpose of soliciting contributions to solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD P	AC									
Α.	Full Name (Last, First, Middle Initial) Marc Asselmeier Mailing Address 750 Brentwood Ct			Date of Receipt							
	City Glen Ellyn	State IL	Zip Code 60137-6365	09     26     2014       Transaction ID : CBDC2DF7D04E4E61B56       Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		39.00							
	Name of Employer DuPage Medical Group, Ltd. Receipt For:	Occupation Physician									
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 780.00	]							
В.	Full Name (Last, First, Middle Initial) James Collins Mailing Address 1673 Imperial Cir	Date of Receipt									
	Maining Address 1673 Imperial Cir			09 12 2014							
	City	State IL	Zip Code	Transaction ID : 41FDEBA2D2CD4D9E91A							
	Naperville           FEC ID number of contributing           federal political committee.	C	60563-0132	Amount of Each Receipt this Period							
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician									
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 780.00	]							
<u>с</u> .	Full Name (Last, First, Middle Initial) James Collins			Date of Receipt							
	Mailing Address 1673 Imperial Cir			M M / D D / Y Y Y Y 09 26 _2014 _							
	City Naperville	State IL	Zip Code 60563-0132	Transaction ID : AB25E184EBF94592BB38           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		39.00							
	Name of Employer	Occupation									
	DuPage Medical Group, Ltd. Receipt For:	Physician		_							
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 780.00	]							
s	UBTOTAL of Receipts This Page (optional)	<u> </u>		117.00							

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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		Detailed Summary Page		11a 13		11b 14	11c		12 16	17					
Any information copied from such Reports and St or for commercial purposes, other than using the				for the		pose of	f solicitin		ntribut	tions					
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	С														
Full Name (Last, First, Middle Initial) A. David Dungan							Date of Receipt								
Mailing Address 211 Palamino Pl				м м 09	/	D 12			ү 014	Y					
City Wheaton	State IL	Zip Code 60189-2046					: <b>A85117</b> Receipt t			16A1CF					
FEC ID number of contributing federal political committee.	C			Amoun		,	ieceipi i	.113 1		.00					
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician														
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 400.00	]												
Full Name (Last, First, Middle Initial) B. David Dungan				Date of	f Re	eceipt									
Mailing Address 211 Palamino Pl				м м 09	/	26			) 14	Y					
City Wheaton	State IL	Zip Code 60189-2046					6AD8D8 Receipt t			F90ABCD					
FEC ID number of contributing federal political committee.	С					1				.00					
Name of Employer DuPage Medical Group, Ltd.	Occupation Physician														
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	]												
Full Name (Last, First, Middle Initial) C. Michael Fitzgerald				Date of	f Re	eceipt									
Mailing Address 1207 Sanctuary Ln				м м 09	/	12			)14	Y					
City Naperville	State IL	Zip Code 60540-1936					<b>: 21050A</b> Receipt t			DE0A931					
FEC ID number of contributing federal political committee.	С					7			39	.00					
Name of Employer	Occupation														
DuPage Medical Group Receipt For:	Physician Aggregate	Year-to-Date ▼													
Primary General Other (specify) ▼		780.00	]												
SUBTOTAL of Receipts This Page (optional)						5	- 7	-	79.	00					

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

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

FOR LINE NUMBER:

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TTEMIZED RECEIPTS		Detailed Summary Page		11a		11b 14	11c	12	17
Any information copied from such Report or for commercial purposes, other than u	s and Statements ma sing the name and a	ay not be sold or used by any p ddress of any political committe	person e to so	for the	purp ntribu	ose o utions	f soliciting	g contribu	utions
NAME OF COMMITTEE (In Full) DuPage Medical Group L	D PAC								
Full Name (Last, First, Middle Initial)         A.         Michael Fitzgerald         Mailing Address 1207 Sanctuary Ln         City         Naperville         FEC ID number of contributing federal political committee.         Name of Employer	State IL C	Zip Code 60540-1936			sactio	26 on ID :	) : 3607464	his Period	B60B264
DuPage Medical Group Receipt For: Primary General Other (specify)	Occupation Physician Aggregate	Year-to-Date ▼ 780.00	]						
B. Full Name (Last, First, Middle Initial) Mailing Address 1105 Adelia St				Date o		ceipt		_2014	Y
City Downers Grove FEC ID number of contributing federal political committee.	State IL	Zip Code 60516-2830		Trans		on ID :	: 46A949	6207A944 his Period	<b>42AB5BD</b> d
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate	Year-to-Date ▼ 1000.00	]						
C. Full Name (Last, First, Middle Initial) Thomas Gallagher Mailing Address 1105 Adelia St				Date o		D		Y Y	Y
City Downers Grove FEC ID number of contributing federal political committee.		09 26 2014 Transaction ID : 580DDCB6F6644F4DA189 Amount of Each Receipt this Period 50.00							
Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify)	C Occupation Physician Aggregate	Year-to-Date ▼ 1000.00	1			<u>y.</u>			
SUBTOTAL of Receipts This Page (opti	onal)	<b>, , , , , , , , , , , , , , , , , , , </b>				,		139	9.00

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			for each category of the Detailed Summary Page		< 11a		11b	11c	12	<u> </u>		
An	y information copied from such Reports an	d Statements ma	ay not be sold or used by any p	erson	13 for the	pur	14 pose of	15 f soliciting	g contrib	utions		
	for commercial purposes, other than using	the name and a	ddress of any political committe	e to se	olicit co	ntrik	outions	from suc	h comm	ittee.		
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD	PAC										
<b>A</b> .	Full Name (Last, First, Middle Initial) Martin Gallo				Date o	of Re	eceipt					
	Mailing Address 118 Allen Ct				м м 09	/	12		2014	Y		
	City		Transaction ID : A05C090ECE50408483BE									
	Clarendon Hills	IL	60514-1466	_	Amoun	t of	Each F	Receipt th	nis Peric	d		
	FEC ID number of contributing federal political committee.	С					,	7	3	39.00		
	Name of Employer	Occupation		_								
	DuPage Medical Group, Ltd.	Physician										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			11.								
	Other (specify)		780.00	4								
	Full Name (Last, First, Middle Initial) Martin Gallo				Date o	of Re	eceipt					
	Mailing Address 118 Allen Ct				M M		26		2014	Y		
	City	State	Zip Code		Transaction ID : 19BB2D6EAF0543CA89 Amount of Each Receipt this Period							
	Clarendon Hills	IL	60514-1466									
	FEC ID number of contributing federal political committee.	С			39.00							
	Name of Employer	Occupation		_								
	DuPage Medical Group, Ltd.	Physician										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General	33 - 3 - 4		11.	1							
	Other (specify)		780.00	4								
	Full Name (Last, First, Middle Initial) John Giardina				Date o	of Re	eceipt					
	Mailing Address 832 Abbey Dr				M M	/	12		2014	Y		
	City	State	Zip Code		the second se	sact				C417CA84		
	Glen Ellyn	IL	60137-6130									
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 38.46							
	Name of Employer				7							
	DuPage Medical Group, Ltd. Receipt For:	Physician		_								
	Primary General	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		769.20									
s	UBTOTAL of Receipts This Page (optional)	)		▶			7	- 1	11	6.46		

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

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a 13		11b 14		11c	$\square$	12 16	17		
	y information copied from such Reports and St for commercial purposes, other than using the				or the		pose		soliciting		ntribut	tions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	С												
A.	Full Name (Last, First, Middle Initial) John Giardina				Date o	f Re	eceipt							
	Mailing Address 832 Abbey Dr				M M	/			/ Y		Y 1	Y		
	City	State	Zip Code	09 26 2014 Transaction ID : A1A14E4B06264222A980										
	Glen Ellyn	IL	60137-6130						eceipt th					
	FEC ID number of contributing federal political committee.	С					7		7	_		.46		
	Name of Employer	Occupation												
	DuPage Medical Group, Ltd.	Physician												
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		769.20	]										
в.	Full Name (Last, First, Middle Initial)				Date o	f Re	eceipt							
	Mailing Address 15224 Summit Ave. Ste. 107				м м 09		D	D 2	/ Y	ү 20	y 14	Y		
	City	State IL	Zip Code		Trans	act	ion ID	: 6	6B2FB74	4F3E	<u>3CC4</u>	C66AC8F		
	Oakbrook Terrace	/	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			42.00							.00		
	Name of Employer	Occupation												
	DuPage Medical Group, Ltd.	Physician												
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		]											
C.	Full Name (Last, First, Middle Initial) L. Douglas Graham				Date o	f Re	eceipt							
	Mailing Address 15224 Summit Ave. Ste. 107				м м 09	/	2	26	/ Y		) 14	Υ		
	City	State	Zip Code									304807B		
	Oakbrook Terrace	IL	60181	/	Amoun	t of	Each	Re	eceipt th	is P	eriod			
	FEC ID number of contributing federal political committee.	С					7			_	42	.00		
	Name of Employer	Occupation												
	DuPage Medical Group, Ltd.	Physician			_									
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify) ▼		840.00	]										
s	UBTOTAL of Receipts This Page (optional)						3		5	_	122.	46		
										1.00	1000			

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

FEC Schedule A (Form 3X) Rev. 02/2003

- J

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Sur , av Daga

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		Detailed Summary Page		<b>〈</b> 11a		11b	11c		12	
<u> </u>					13		14	15		16	17
Ar or	y information copied from such Reports and for commercial purposes, other than using	d Statements mather the name and a	ay not be sold or used by any p address of any political committee	erson e to so	for the plicit co	purp ntrib	oose of utions	f soliciting from suc	g cor h co	ntribut mmitt	tions ee.
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD F	PAC									
Α.	Full Name (Last, First, Middle Initial) Glenn Grobe Mailing Address 719 Mesa Dr				Date o	f Re	D I			Y	Y
	City	State	Zip Code		09 Trans	sacti	12 on ID ·	: D1D6F8		014 BC24	8469304
	Naperville	IL	60565-5312					Receipt th			
	FEC ID number of contributing federal political committee.	C					,		_	15	.00
	Name of Employer	Occupation	1								
	DuPage Medical Group, Ltd.	Physician									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		300.00								
в.	Full Name (Last, First, Middle Initial) Glenn Grobe				Date o	f Re	ceipt				
	Mailing Address 719 Mesa Dr				м м 09	/	26			)14	Y
	City		Trans	sacti	on ID :	3413CC	F83F	<b>-</b> 5A42	9DBC15		
	Naperville	IL		Amoun	t of	Each F	Receipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	С					7		_	15.	.00
	Name of Employer	Occupation	l								
	DuPage Medical Group, Ltd.	Physician									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify)		300.00								
<u>с</u> .	Full Name (Last, First, Middle Initial) Linda Gruener				Date o	f Re	ceipt				
	Mailing Address 8207 Gruener Ct				м м 09	/	12			) 14	Y
	City	State IL	Zip Code 60465-2200					FCE5D2			F579588
	Palos Hills	12	60465-2200	_	Amoun	t of	Each F	Receipt th	າis P	eriod	
	FEC ID number of contributing federal political committee.	C					, .		_	100	.00
	Name of Employer	Occupation	1								
	DuPage Medical Group, Ltd.	Physician									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2000.00	ıL.							
s	UBTOTAL of Receipts This Page (optional).		······································				7	7	_	130.	00

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

FOR LINE NUMBER:

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TIEMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>K</b> 11a		11b	11c		12	
Any information copied from such Reports or for commercial purposes, other than us	and Statements ma	ay not be sold or used by any p	erson	for the	pur	14 pose o	f solicitin	g coi	16 ntribut	tions
NAME OF COMMITTEE (In Full) DuPage Medical Group LT		duress of any political committee				Julions	Irom suc	in co	mmu	<u>.</u>
Full Name (Last, First, Middle Initial)         Linda Gruener         Mailing Address 8207 Gruener Ct         City         Palos Hills         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60465-2200 Year-to-Date ▼ 2000.00			sact	26 ion ID		20 <b>4354</b> :		94AA710
B. Full Name (Last, First, Middle Initial) Mailing Address 640 S Washington St Ste 268 City Naperville	State	Zip Code 60540-6694			sact	12 ion ID		20 F6CA		
FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For:	C Occupation Physician Aggregate		]			7	7		21.	00
Full Name (Last, First, Middle Initial)         Naira Hashmi         Mailing Address 640 S Washington St         Ste 268         City         Naperville         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60540-6694 Year-to-Date ▼ 420.00			sact	26 tion ID		20 6 <b>2F5</b>	Period	
SUBTOTAL of Receipts This Page (option	nal)					7	7		142.	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:

(check only one)

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39

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)         DuPage Medical Group LTD PAC         Full Name (Last, First, Middle Initial)         Mailing Address 640 S Washington St         Ste 268				Detailed Summary Page		-		11b	11c		12				
ar 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)         DuPage Medical Group LTD PAC         Full Name (Last, First, Middle Initiar)         A. Maleeha Hashmi-Basha         Mailing Address 640 S Washington St         City         Name of Contributing federal political committee.         DuPage Medical Group, Ltd.         Primary       General         Other (specify) ▼         Build Address 640 S Washington St         State       Zip Code         Name of Employer       Occupation         DuPage Medical Group, Ltd.       Physician         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       Gocupation         State Zip Code       Name of Employer         Doccupation       Date of Receipt         Mailing Address 640 S Washington St       State         State Zip Code       Name of Employer         Doccupation       Cocupation         Prescipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼         Physician       Receipt For:         Aggregate Year-to-Date ▼       Date of Receipt <th>An</th> <th>y information copied from such Reports and</th> <th>Statements ma</th> <th>ay not be sold or used by any p</th> <th>erson</th> <th>13 for the</th> <th>puri</th> <th>14 pose of</th> <th>15 soliciting</th> <th>col</th> <th>16 ntribut</th> <th>ions</th>	An	y information copied from such Reports and	Statements ma	ay not be sold or used by any p	erson	13 for the	puri	14 pose of	15 soliciting	col	16 ntribut	ions			
DuPage Medical Group LTD PAC         Full Name (Last, First, Middle Initial)         A.       Mailing Address         Mailing Address       540 2 Washington St         City       State         Name of Employer       Occupation         Precipt For:       Occupation         Primary       General         Other of contributing tederal political committee.       Occupation         Primary       General         Other (specify) ▼       400.00         Full Name (Last, First, Middle Initial)       B.         B.       Maleeha Hashmi-Basha         Mailing Address 640 S Washington St       00         City       State       Zip Code         Name of Employer       Occupation         Purpage Medical Group, Ltd.       Physician         B.       Maleeha Hashmi-Basha         Mailing Address 640 S Washington St       City         Name of Employer       Occupation         Purpage Medical Group, Ltd.       Physician         Receipt Tori       Occupation         Purpage Medical Group, Ltd.       Physician         Receipt Pori       Occupation         Purpage Medical Group, Ltd.       Physician         Receipt Pori       Aggregate Year-to-Date															
Full Name (Last, First, Middle Initial)         A. Maleeha Hashmi-Basha         Maling Address 640 S Washington St         Sie 268         Naperville         LL       60540-6694         FEC ID number of contributing federal political committee.         DuPage Medical Group, Ltd.         Physician         Receipt For:    Other (specify) ▼         City       Adgregate Year-to-Date ▼         Ptill Name (Last, First, Middle Initial)         B. Maleeha Hashmi-Basha         Maling Address 640 S Washington St Ste 268         State       Zip Code         Name (Last, First, Middle Initial)         D. Maleeha Hashmi-Basha         Maling Address 640 S Washington St Ste 268         State       Zip Code         Naperville       LL         B. Maleeha Hashmi-Basha         Maling Address 640 S Washington St Ste 268         State       Zip Code         Name of Employer       Occupation         DuPage Medical Group, Ltd.       Physician         Receipt For:    Other (specify) ▼       Agregate Year-to-Date ▼         Other (specify) ▼       General         Other (specify) ▼       General         Other (specify) ▼       General         Other (specify) ▼ </th <th></th>															
A.       Maileeha Hashmi-Basha       Date of Receipt         Mailing Address 640 S Washington St       Site 28       Site Zip Code         Otiv       Site 28       Site Zip Code         Name of Employer       C       Amount of Each Receipt this Period         DuPage Medical Group, Ltd.       Physician         Receipt For:       Aggregate Year-to-Date ▼         Other (specify ▼       General         Other (specify ↓       Site Zip Code         Mailing Address 640 S Washington St       Site Zip Code         Site 288       Site Zip Code         Name of Employer       Aggregate Year-to-Date ▼         DuPage Medical Group, Ltd.       Physician         Receipt For:       Aggregate Year-to-Date ▼         Other (specify ▼       General         Other (specify ▼       C         B.       Maleeha Hashmi-Basha         Mailing Address fed S Washington St       Size Zip Code         Name of Employer       Occupation         DuPage Medical Group, Ltd.       Physician         Receipt For:       Aggregate Year-to-Date ▼         Phimary       General         Other (specify ▼       General         Other (specify ▼       General         Other (specify ▼       Aggrega		DuPage Medical Group LTD P	AC												
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federal political committee.       20.00         Name of Employer       Occupation         DuPage Medical Group, Ltd.       Physician         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       400.00         Full Name (Last, First, Middle Initial)       Date of Receipt         City       State       Zip Code         Wheaton       IL       60189-2020         FEC ID number of contributing federal political committee.       Occupation         Name of Employer       Occupation         DuPage Medical Group, Ltd.       Physician         Receipt For:       Occupation         Primary       General         Other (specify) ▼       Occupation         Mailing Address       160189-2020         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         DuPage Medical Group, Ltd.       Physician         Receipt For:       Aggregate Year-to-Date ▼         Primary       General       Aggregate Year-to-Date ▼         Other (specify) ▼       Aggregate Year-to-Date ▼       833.40		Naperville													
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federal political committee.     C     41.67       Name of Employer     Occupation       DuPage Medical Group, Ltd.     Physician       Receipt For:     Aggregate Year-to-Date ▼       Primary     General       Other (specify)     833.40		Wheaton	IL	60189-2020	_	Amoun	t of	Each R	eceipt th	is P	Period				
Name of Employer     Occupation       DuPage Medical Group, Ltd.     Physician       Receipt For:     Aggregate Year-to-Date ▼       Primary     General       Other (specify)     833.40		5	С			· · ·					41	.67			
DuPage Medical Group, Ltd.     Physician       Receipt For:     Aggregate Year-to-Date ▼       Primary     General       Other (specify)     833.40								7	7						
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       833.40															
Primary General Other (specify) ▼ 833.40			Physician												
Other (specify)			Aggregate	Year-to-Date ▼											
				833.40	1										

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

FOR LINE NUMBER:

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			Detailed Summary		×	11a 13		11b 14	11c		12 16		17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	y not be sold or used ddress of any politica	d by any pe I committee	rson f to sol	or the	purp ntrib	oose of utions	solicitin	g co h co	ntribut	ions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	C											
A.	Full Name (Last, First, Middle Initial) James Hermann				[	Date of	Re	ceipt					
	Mailing Address 1962 Hampton Dr					м м 09	/	26			) 014	Y	
	City	State	Zip Code			Trans	acti	on ID :	B0DE20	)E70	2B64E	EAOA	F9F
	Wheaton	IL	60189-2020		_ 4	Amount	of	Each F	Receipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.							,	9		41.	.67	
	Name of Employer	Occupation											
	DuPage Medical Group, Ltd.	Physician											
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		а а	833.40									
R	Full Name (Last, First, Middle Initial)					Date of	Re	ceint					
	Mailing Address 1155 N Dearborn St Apt. 804					м м	1	12			)14	Y	
	City	State	Zip Code			Trans	acti	on ID :	2615590	)D36	DE4C	2797	'6C
	Chicago	IL	60610-6539		A	Amount	of	Each F	Receipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	C						,	7		39.	00	
	Name of Employer	Occupation			_								
	DuPage Medical Group, Ltd.	Physician											
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General	33 - 3											
	Other (specify)		<b>, , , , , , , , , , , , , , , , , , , </b>	780.00									
C.	Full Name (Last, First, Middle Initial) Te-Shao Hsu				[	Date of	Re	ceipt					
	Mailing Address 1155 N Dearborn St Apt. 804					м м 09	/	26			ү )14	Y	
	City	State	Zip Code			Trans	acti	ion ID :	346792	F43E	E84C	F295	506
	Chicago	IL	60610-6539		/	Amount	of	Each F	Receipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	С						7			39	.00	
	Name of Employer	Occupation											
DuPage Medical Group, Ltd. Phys													
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General Other (specify) ▼		<b></b>	780.00									
s	UBTOTAL of Receipts This Page (optional)							7			119.	67	
								1.1.1			1000		

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

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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

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

FOR LINE NUMBER:

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IEMIZED RECEIPIS		Detailed Summary Page				11b 14	11c		2 6	17
Any information copied from such Report or for commercial purposes, other than u	s and Statements ma sing the name and a	ay not be sold or used by any p ddress of any political committe	berson e to s	13 for the olicit co	pui ntril	rpose o	f soliciting	g cont	ributio	ons
NAME OF COMMITTEE (In Full) DuPage Medical Group LT	D PAC									
Full Name (Last, First, Middle Initial)         A.         Robert Hurst         Mailing Address 1348 Richmond Ln         City         Bartlett         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State IL C Occupation Physician Aggregate	Zip Code 60103-8939 Year-to-Date ▼ 780.00			sact	tion ID		201 <b>F29B0</b>	E42F	AA2EF
Full Name (Last, First, Middle Initial) B. Robert Hurst Mailing Address 1348 Richmond Ln				Date o	of Re	eceipt	D / Y	Y	Y	Y
City Bartlett FEC ID number of contributing federal political committee.	State IL	Zip Code 60103-8939					5 : <b>7557AB</b> Receipt th		8443	_
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify)	Occupation Physician Aggregate	Year-to-Date ▼ 780.00	1			<u> </u>				
Full Name (Last, First, Middle Initial)         C.         Cameron Jirschele         Mailing Address         1510 N Bosworth Ave         #3         City         Chicago         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State IL Occupation Physician	Zip Code 60642-7612 Year-to-Date ▼ 400.00			sac	tion ID			4 <b>-A4B</b>	32AA6D
SUBTOTAL of Receipts This Page (opti	onal)					7			98.0	0

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:

(check only one)

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			Detailed Summary Page		11a		11b	11c	12			
					13		14	15	16	1		
	y information copied from such Reports and for commercial purposes, other than using t											
$\rangle$	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD F	PAC										
A.	Full Name (Last, First, Middle Initial) Cameron Jirschele				Date o	f Re	eceipt					
	Mailing Address 1510 N Bosworth Ave #3				09 26 _ 2014 _							
	City	State	Zip Code		Trans	sact		59BEA2		64E7FB		
	Chicago	IL	60642-7612	A	Amoun	t of	Each R	eceipt th	is Peric	d		
	FEC ID number of contributing federal political committee.	С		20.00								
	Name of Employer	Occupation										
	DuPage Medical Group, Ltd.	Physician										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		400.00	11								
	Other (specify)		400.00									
в.	Full Name (Last, First, Middle Initial) Robert King				Date o	f Re	eceipt					
	Mailing Address 2796 Crestfield Ct				м м 09	/	D D D 12	/ Y	ү ү 2014	Y		
	City	State	Zip Code		Trans	act	ion ID :	3A80E62	22210C4	47E0B8E		
	Naperville	IL	60565-3043	A	Amoun	t of	Each R	eceipt th	is Perio	d		
	FEC ID number of contributing federal political committee.	С				,		4	1.67			
	Name of Employer	Occupation	I									
	DuPage Medical Group, Ltd.	Physician										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.40	]								
с.	Full Name (Last, First, Middle Initial) Robert King	1			Date o	f Re	eceipt					
	Mailing Address 2796 Crestfield Ct				м м	/	26	/ Y	2014	Y		
	City Naperville	State IL	Zip Code 60565-3043		Trans		ion ID :	19BD7B eceipt th	693618			
	FEC ID number of contributing federal political committee.	С								41.67		
	Name of Employer Occupation											
	DuPage Medical Group, Ltd.	Physician										
	Receipt For:		Year-to-Date ▼									
	Primary General			1								
	Other (specify)		833.40									

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
				erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	AC		
Α.	Full Name (Last, First, Middle Initial) Richard Krouse Mailing Address 4720 Lee Ave		Date of Receipt	
	City St Downers Grove IL		Zip Code 60515-3319	Transaction ID : 5CF484B6429740798CA6
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer DuPage Medical Group, Ltd. Receipt For:	Occupation Physician	Year-to-Date ▼	
	Primary General Other (specify) ▼	Aygreyate	400.00	1
	Full Name (Last, First, Middle Initial) Richard Krouse			Date of Receipt
	Mailing Address 4720 Lee Ave			09 26 2014
	City	State	Zip Code	Transaction ID : 05FD49AB1B704EA6B5BA
	Downers Grove           FEC ID number of contributing         federal political committee.	C	60515-3319	Amount of Each Receipt this Period
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	]
<u>с</u> .	Full Name (Last, First, Middle Initial) Norman Kumins			Date of Receipt
	Mailing Address 677 Duane St			M = M / D = D / Y = Y = Y = Y 09 12 _ 2014 _
	City Glen Ellyn	State IL	Zip Code 60137-4611	Transaction ID : 2B670902968648E0A8B6 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	39.00		
	Name of Employer	Occupation		_
	DuPage Medical Group, Ltd.	Physician		_
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 780.00	1
s	UBTOTAL of Receipts This Page (optional)			79.00

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

FEC Schedule A (Form 3X) Rev. 02/2003

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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		Detailed Summary Page		11a 13		11b 14	11c		12 16		7
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	not be sold or used by any pe ress of any political committee	erson to so	for the	pur ntrib	pose o	f soliciting	g cor h co	ntribut	ions	/
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	C										
Full Name (Last, First, Middle Initial)         A.       Norman Kumins         Mailing Address 677 Duane St         City         Glen Ellyn         FEC ID number of contributing         federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify)	State IL Occupation Physician Aggregate Ye	Zip Code 60137-4611 Par-to-Date ▼ 780.00			/ act	26 ion ID		20 3 <b>F20</b>			97
Full Name (Last, First, Middle Initial)         B. David Labotka         Mailing Address 1312 S Ridge Rd         City         Willowbrook         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State IL Occupation Physician Aggregate Ye	Zip Code 60527-1896 ear-to-Date ▼ 416.60	_		/ acti	12		20 290B		_	<u>7C</u>
Full Name (Last, First, Middle Initial)         David Labotka         Mailing Address 1312 S Ridge Rd         City         Willowbrook         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify)	State IL Occupation Physician Aggregate Ye	Zip Code 60527-1896 ear-to-Date ▼ 416.60			/ sact	ion ID		20 6 <b>A3</b>	Period		<u>1C</u>
SUBTOTAL of Receipts This Page (optional)		•••••	• -			1		-	80.	66	]

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

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17			
				erson for the purpose of soliciting contributions to solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD F	AC					
Α.	Full Name (Last, First, Middle Initial) Aaron Lazar			Date of Receipt			
	Mailing Address 1564 Abbotsford Dr	State	Zip Code	09 12 2014 Transaction ID : 3728358DA9E04288A64B			
	Naperville I		60563-2088	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer	Occupation	1				
	DuPage Medical Group, Ltd.	Physician		_			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_			
	Other (specify) V		500.00	]			
в.	Full Name (Last, First, Middle Initial) 3. Aaron Lazar			Date of Receipt			
	Mailing Address 1564 Abbotsford Dr	M = M         /         D = D         /         Y = Y = Y = Y         Y         O         O         O         Image: 2014 and 2014 an					
	City	State	Zip Code	Transaction ID : B6C9DFA906DE4906A7E			
	Naperville	IL	60563-2088	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer	Occupation	1	_			
	DuPage Medical Group, Ltd.	Physician					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	]			
с.	Full Name (Last, First, Middle Initial)			Date of Receipt			
	Mailing Address 385 Maple St			09 12 2014			
	City Glen Ellyn	State IL	Zip Code 60137-3811	Transaction ID : 0615A0EBEBCD4C36B1A Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	s a l					
	Name of Employer	Occupation	1	_			
DuPage Medical Group, Ltd. Phys							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00				
s	UBTOTAL of Receipts This Page (optional)			70.00			

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

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		11a		11b 14	11c		12	17			
Any information co or for commercial	opied from such Report purposes, other than u	s and Statements ma sing the name and ad	y not be sold or used by any p ddress of any political committe	berson be to so	for the	pur pontrik	pose o	15 f solicitin from suc	g cor ch co	16 ntributi mmitte	ons			
	MMITTEE (In Full) Adical Group L	TD PAC												
Full Name (Las A. Thomas Leo	st, First, Middle Initial) e				Date o	of Re	eceipt							
Mailing Addres	s 385 Maple St				09 26 2014									
City Glen Ellyn		State IL	Zip Code 60137-3811		Transaction ID : 41B6A84C1C394947A046           Amount of Each Receipt this Period									
FEC ID numbe federal political	er of contributing committee.	C			20.00									
Name of Emplo DuPage Medica		Occupation Physician												
Receipt For: Primary Other (sp	General Gecify) ▼	Aggregate	Year-to-Date ▼ 400.00	]										
B. Ernest Lize					Date o	of Re	eceipt							
	s 416 S Sleight St	Chaira	Zin Onda		м м 09	/	12	2	20	)14	Y			
City Naperville		State IL	Zip Code 60540-5441					E1282D			29977D			
	er of contributing committee.	С		Amount of Each Receipt this Period					00					
Name of Emplo DuPage Medica	•	Occupation Physician			-									
Receipt For: Primary Other (sp	General pecify) ▼	Aggregate	Year-to-Date ▼ 780.00	]										
Full Name (Las C. Ernest Lize	st, First, Middle Initial) ek				Date o	of Re	eceipt							
	s 416 S Sleight St				м м 09	л /	26			)14	Y			
City Naperville		State IL	Zip Code 60540-5441					: <b>459BB</b> Receipt t			E17BFCF			
FEC ID numbe federal political	er of contributing committee.	C					<b>y</b>			39.	00			
Name of Emplo	oyer	Occupation												
DuPage Medica	al Group, Ltd.													
Receipt For: Primary Other (sp	General Gecify) ▼	Aggregate	Year-to-Date ▼ 780.00											
SUBTOTAL of R	eceipts This Page (opti	onal)		•			7	7	-	98.0	00			

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	ny information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	NC		
Α.	Full Name (Last, First, Middle Initial)         Nicholas Mataragas         Mailing Address       6105 Timber Ridge Ct			Date of Receipt
	<u></u>	Otata	Zin Code	09122014
	City Indian Head Park	State IL	Zip Code 60525-3759	Transaction ID : E1D0DB76E0B24412A011
		С		Amount of Each Receipt this Period
	Name of Employer	Occupation	 	
	DuPage Medical Group, Ltd.	Surgeon		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		384.60	
	Other (specify)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
в.	Full Name (Last, First, Middle Initial) 3. Nicholas Mataragas			Date of Receipt
	Mailing Address 6105 Timber Ridge Ct	09 26 2014		
	City	State	Zip Code	Transaction ID : 77202BD6F4014E1E8BE2
	Indian Head Park	IL	60525-3759	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		19.23
	Name of Employer	Occupation		_
	DuPage Medical Group, Ltd.	Surgeon		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify)		384.60	
— c.	Full Name (Last, First, Middle Initial) Paul Merrick			Date of Receipt
	Mailing Address 540 Hill Ave			09 12 2014
	City Glen Ellyn	State IL	Zip Code 60137-5032	Transaction ID : 7A3368D176484F94B6ED Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer	Occupation		
	DuPage Medical Group, Ltd.	Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify)		400.00	
s	UBTOTAL of Receipts This Page (optional)		•	58.46

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

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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TTEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DuPage Medical Group LTE	D PAC		
Full Name (Last, First, Middle Initial)         Paul Merrick         Mailing Address 540 Hill Ave         City         Glen Ellyn         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State IL C Occupation Physician Aggregate	Zip Code 60137-5032 Year-to-Date ▼ 400.00	Date of Receipt
B. Full Name (Last, First, Middle Initial) M. Paul Meyer Mailing Address 1801 S Highland Ave			Date of Receipt
City Lombard FEC ID number of contributing federal political committee. Name of Employer DuPage Medical Group, Ltd. Receipt For: ☐ Primary ☐ General Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60148-4932 Year-to-Date ▼ 780.00	Transaction ID : B290C5DDD56343FD8076 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial)         C.       M. Paul Meyer         Mailing Address 1801 S Highland Ave         City         Lombard         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State IL C Occupation Physician Aggregate	Zip Code 60148-4932 Year-to-Date ▼ 780.00	Date of Receipt
SUBTOTAL of Receipts This Page (option	al)		98.00

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FEC Schedule A (Form 3X) Rev. 02/2003

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

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	ED RECEIPTS		for each category of the Detailed Summary Page		11a		11	1b 4	11c	12	17				
	mation copied from such Reports and nmercial purposes, other than using th				for the		irpos	se of	solicitin	g contrib	outions				
	OF COMMITTEE (In Full) Page Medical Group LTD P	AC													
A. Yoko	ame (Last, First, Middle Initial) 5 <b>Momoyama</b> 9 Address PO Box 7144				Date o		_	ipt D D 12	/ Y	2014	Y				
City Villa F	CityStateZip CodeVilla ParkIL60181-7144							n ID :			049DCA17 od				
federa	D number of contributing I political committee.	С					7			3	39.00				
DuPag	of Employer ge Medical Group, Ltd.	Occupation Physician													
I	But age include Group, Ed.     Information       Receipt For:     Aggregate Year-to-Date ▼       Other (specify) ▼     780.00														
	ame (Last, First, Middle Initial) D Momoyama	1			Date o	of R	Rece	ipt							
Mailing	Mailing Address PO Box 7144						M M / D D / Y Y Y Y Y 09 26 _2014 _								
City								Transaction ID : 4B7CB9F0AE6E4DC88E5							
	ark D number of contributing I political committee.	C	60181-7144		Amount of Each Receipt this Period										
	of Employer Je Medical Group, Ltd.	Occupation Physician													
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 780.00	]											
	ame (Last, First, Middle Initial) k Nelson	l			Date of	of R	Rece	ipt							
Mailing	Mailing Address 3753 King Williams Ct						/	12	/ Y	2014	Y				
City Saint	Charles	State IL	Zip Code 60174-7806							3556E62 his Peric	244A799D6 od				
	D number of contributing I political committee.	С					7			2	20.00				
Name	of Employer														
	ge Medical Group, Ltd.	Physician													
	Primary General Other (specify) <del>V</del>	Aggregate	Year-to-Date ▼ 400.00	]											
SUBTO	TAL of Receipts This Page (optional)						,		7	g	98.00				

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

FEC Schedule A (Form 3X) Rev. 02/2003

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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••	EMIZED RECEIPTS		Detailed Summary Page		<b>&lt;</b> 11a		11b	11c		12				
Ar	ny information copied from such Reports and	Statements m	av not be sold or used by any n	erson	13 for the	DUr	14 pose o	15 f soliciting		16 htributi	17 ions			
	for commercial purposes, other than using t													
$\setminus$	NAME OF COMMITTEE (In Full)	_												
	DuPage Medical Group LTD F	PAC												
Α.	Full Name (Last, First, Middle Initial) Mark Nelson				Date o	f Re	eceipt							
	Mailing Address 3753 King Williams Ct				M M	_	D	D / Y	Y	Y	Y			
		<b>a</b>			09		26			)14				
	City Saint Charles	State IL	Zip Code 60174-7806	-			-	: 00B507			2294F6			
			00174-7000		Amoun	t of	Each	Receipt th	nis Pe	eriod				
	FEC ID number of contributing federal political committee.	C					7		_	20.	00			
	Name of Employer	Occupation	1											
	DuPage Medical Group, Ltd.	Physician												
	Receipt For:	Aggregate	Year-to-Date <b>V</b>											
	Primary General		400.00	11.										
	Other (specify)		1	1										
B	Full Name (Last, First, Middle Initial) Ravi Nemivant				Date o	f Re	eceipt							
	Mailing Address 561 Hevern Dr				09	/	12		20 <sup>-</sup>	14	Y			
	City		Transaction ID : 38CF28B998024E5F9326											
	Wheaton	IL	60189-7396		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C					,	7	_	25.0	00			
	Name of Employer	Occupation	1											
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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DuPage Medical Group I	ID PAC										
Full Name (Last, First, Middle Initial) A. Brian O'Leary				to of	Dee	aint					
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B. Brian O'Leary Mailing Address 401 59th St				ate of	Rec						
Maining Address 401 59th St			IV.	09		26	/ Y	2014	Y		
City	State	Zip Code	Т		actio		90237A5		D7CB33D		
Downers Grove	IL	60516-1440	An	nount	t of E	eceipt th	eipt this Period				
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DuPage Medical Group, Ltd.	Physician										
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		1	- 1-								
Full Name (Last, First, Middle Initial) C. James Oakley			Da	ate of	Rec	eipt					
Mailing Address 605 S Grant St	N	о 09	1	12	/ Y	2014	Y				
City	State	Zip Code		rans	actic	on ID :	3E89E1		12AAB248		
Hinsdale	IL	60521-4453	An	nount	t of E	Each R	eceipt th	nis Perio	d		
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SCHEDULE A	(FEC Form 3X)
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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)       DuPage Medical Group LTD PAC         Full Name (Last, First, Middle Initial)       A. James Oakley         Mailing Address 605 S Grant St       Date of Receipt         City       State       Zip Code         Hinsdale       IL       60521-4453         FEC ID number of contributing federal political committee.       Occupation         DuPage Medical Group, Ltd.       Physician/Radiologist         Receipt For:       Octup (Specify)         Primary       General         Other (specify)       Aggregate Year-to-Date          Full Name (Last, First, Middle Initial)       B. Mathew Philip         Mailing Address 1608 W North Ave       Date of Receipt         Mailing Address 1608 W North Ave       Op / 12 / 2014		EMIZED RECEIPTS		Detailed Summary Page		<b>&lt;</b> 11a		11b	11c		12					
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.          NAME CF COMMITTEE (in Full)         DuPage Medical Group LTD PAC         Full Name (Last, First, Middle Initial)         A. James Cakley         Mailing Address 605 S Gran St         Gity       State         Hindadie       L         B. Matchew Philip         Mailing Address 1608 W North Ave         Apt. 3         Gity       State         Chicago       IL         Gity       State         Purpose Medical Group, Ltd.         Physician/Radiologist         Receipt For:         Apt. 3         Gity       State         Chicago       IL         Gotter (specify) ▼         Obter (specify) ▼         Decupation         Page Medical Group, Ltd.         Physician         Receipt For:         Other (specify) ▼         Obter (specify) ▼         Obter (specify) ▼         Obter (specify) ▼         Obter (specify) ▼         Primary       General         Other (specify) ▼       Occupation         Physician         Receipt Horning <th>Δ.</th> <th>w information conied from such Denote and</th> <th>Statomonto m</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>1</th> <th>17</th>	Δ.	w information conied from such Denote and	Statomonto m								1	17				
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federal political committee.       39.00         Name of Employer       Occupation         DuPage Medical Group, Ltd.       Physician         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       780.00		•														
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SCHEDULE A	(FEC Form 3X)
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and Sta or for commercial purposes, other than using the		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA	C	
Full Name (Last, First, Middle Initial)         A.         Stephen Pierson         Mailing Address 1800 N Main St         City         Wheaton         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State       Zip Code         IL       60187-3112         C       C         Occupation       Physician         Aggregate Year-to-Date ▼       420.00	Date of Receipt
Full Name (Last, First, Middle Initial)         Stephen Pierson         Mailing Address 1800 N Main St         City         Wheaton         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State     Zip Code       IL     60187-3112       C     Occupation       Physician       Aggregate Year-to-Date ▼	Date of Receipt
Full Name (Last, First, Middle Initial)         John Porcelli         Mailing Address 4530 Lee Ave         City         Downers Grove         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary         General         Other (specify) ▼	State IL       Zip Code 60515-2607         C       C         Occupation Physician       C         Aggregate Year-to-Date ▼       400.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		62.00

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ITEMIZED RECEIPTS		Detailed Summary Page		11a		11b	11c		12	47								
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NAME OF COMMITTEE (In Full) DuPage Medical Group LTD	-																	
Full Name (Last, First, Middle Initial) A. John Porcelli							Date of Receipt											
Mailing Address 4530 Lee Ave				09 26 / Y Y Y Y Y														
City Downers Grove	State IL	Zip Code 60515-2607					: 920F5 Receipt			329065								
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Name of Employer DuPage Medical Group, Ltd.	Occupation Physician																	
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Full Name (Last, First, Middle Initial) B. Raghu Pulluru						Date of Receipt												
Mailing Address 3908 Littlestone Cir					09 12 2014													
City Naperville	State IL	Zip Code 60564-5915		Transaction ID : A80627365D67418A8FF Amount of Each Receipt this Period 19.23														
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Name of Employer DuPage Medical Group, Ltd.	Occupation Physician																	
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

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A. Kevin Reg Mailing Addre City Warrenville FEC ID num federal polition Name of Em DuPage Med Receipt For:	ber of contributing cal committee. ployer ical Group, Ltd.	State IL Occupation Physician	Zip Code 60555-5923 Year-to-Date ▼ 653.82	09 Trans	saction II	26 D : EF9ABI n Receipt ti	his Period	46F9439
B. Steven So Mailing Addre City Hinsdale FEC ID num federal politic Name of Em DuPage Med	ber of contributing committee.	State IL Occupation Physician	Zip Code 60521-8104	09 Trans	action II	12 12 12 12 12 12 12 12 12 12	his Period	
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SCHEDULE A	(FEC Form 3X)
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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13	F	11b	11c	12		17				
	y information copied from such Reports and for commercial purposes, other than using the				for the		rpose (	of solicitin	g contril	butio	ons				
	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD P														
A.	Full Name (Last, First, Middle Initial)         Grant Sievertsen         Mailing Address 1304 Midwest Club Pkwy						Date of Receipt								
	City Oak Brook	State IL	Zip Code 60523-2519		2DB1FE										
	FEC ID number of contributing federal political committee.	С			Amour		r Each	Receipt t		oa 19.2	23				
	Name of Employer DuPage Medical Group, Ltd.	Occupation Physician													
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в.	Full Name (Last, First, Middle Initial) Grant Sievertsen						Date of Receipt								
	Mailing Address 1304 Midwest Club Pkwy						M M / D D / Y Y Y Y 09 26 2014								
	City Oak Brook	State IL	Zip Code 60523-2519		Tran		tion ID	: 2455339	9644364		AD37				
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<u>с</u> .	Full Name (Last, First, Middle Initial) Lenora Su				Date o	of R	eceipt								
	Mailing Address 1404 Chelsea Ln				M 09	N	/ D	D / Y 2	2014		ſ				
	City Naperville	State IL	Zip Code 60565-1612					: CA0BD Receipt t			A7A808				
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SCHEDULE A	(FEC Form 3X)	)
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			Detailed Summary Page	X	11a 13		11b 14	11c		12 16	17					
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	Mailing Address 1404 Chelsea Ln				09 26 2014											
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в.	Full Name (Last, First, Middle Initial) Arnaldo Torres				Date of	f Re	eceipt									
	Mailing Address 229 Wren Ct				09 12 2014											
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C.	Full Name (Last, First, Middle Initial) Arnaldo Torres			C	Date of	f Re	eceipt									
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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Any information copied from such Reports or for commercial purposes, other than us			erson for the pu	rpose of	soliciting	contribu	tions			
NAME OF COMMITTEE (In Full) DuPage Medical Group LT	-									
Full Name (Last, First, Middle Initial)         Joseph Towers         Mailing Address 412 S Columbia St         City         Naperville         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State Zip Coo IL 60540- C Occupation Physician Aggregate Year-to-Date	5418	Date of R	/ 12	8206B6B3	Period				
Full Name (Last, First, Middle Initial)         Joseph Towers         Mailing Address 412 S Columbia St         City         Naperville         FEC ID number of contributing federal political committee.	State Zip Coo IL 60540-1		09 Transact							
Name of Employer DuPage Medical Group, Ltd. Receipt For: Primary General Other (specify) v	Occupation Physician Aggregate Year-to-Date	e ▼ 833.40	]							
Full Name (Last, First, Middle Initial)         Feodor Ung         Mailing Address 711 Wellner Rd         City         Naperville         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State Zip Coo IL 60540- C Occupation Physician Aggregate Year-to-Date	6727	Date of R O9 Transac Amount of	12	8657E917	Period				
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or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) DuPage Medical Group LTD PA		ddress of any political committee	e to sc	DIICIT CO	ntric	outions	from suc	n co	mmitte	e.				
Full Name (Last, First, Middle Initial) Feodor Ung Mailing Address 711 Wellner Rd City Naperville FEC ID number of contributing	State IL	Zip Code 60540-6727	Date of Receipt											
federal political committee.          Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         □       Primary         □       General         Other (specify)       ▼	C Occupation Physician Aggregate	Year-to-Date ▼ 780.00				A)			39.	00				
Full Name (Last, First, Middle Initial)         B.       Van Vallina         Mailing Address 241 Lorraine St         City         Glen Ellyn         FEC ID number of contributing federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60137-5326 Year-to-Date ▼ 780.00			acti	12 ion ID		20 <b>B93</b>		_	<u>16A</u>			
Full Name (Last, First, Middle Initial)         Van Vallina         Mailing Address 241 Lorraine St         City         Glen Ellyn         FEC ID number of contributing         federal political committee.         Name of Employer         DuPage Medical Group, Ltd.         Receipt For:         Primary       General         Other (specify) ▼	State IL Occupation Physician Aggregate	Zip Code 60137-5326 Year-to-Date ▼ 780.00			sact	ion ID		20 5BFE	Period		F28			
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SCHEDULE A	(FEC Form 3X)
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City Oak Brook	State IL	Zip Code 60523-2522		Tran			B63A0382DA5C4AF79BD								
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Full Name (Last, First, Middle Initial)         B. Jaime Villanueva         Mailing Address 1610 Midwest Club Pkwy	Jaime Villanueva									V					
City Oak Brook	State IL	Zip Code 60523-2522				tion IE			2014 5DF7A4	CF080B					
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Full Name (Last, First, Middle Initial) C. Caroline Wolfe				Date o	of R	leceipt	t								
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City Elmhurst	State IL	Zip Code 60126-2324							49B3C0 is Perio	<b>4D08B45</b> d					
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SCHEDULE A	(FEC Form 3X)
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	NAME OF COMMITTEE (In Full) DuPage Medical Group LTD	PAC													
Α.	Full Name (Last, First, Middle Initial) Caroline Wolfe Mailing Address 132 E Fremont Ave				Date o		eceipt	D / Y	( Y	Ŷ	Y				
					09		26		20						
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В.	Full Name (Last, First, Middle Initial) Andrew Yu				Date o	of Re	eceipt								
	Mailing Address 76 Mitchell Cir				м м 09	/	D 12	2	201		Y				
	City Wheaton	State IL	Zip Code 60189-5928		Transaction ID : 8A178F6D344D4A7B852F         Amount of Each Receipt this Period         20.83										
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	DuPage Medical Group, Ltd. Receipt For:	Physician													
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FEC Schedule A (Form 3X) Rev. 02/2003

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S	CHEDULE B (FEC Form 3X)		F	DR I	INE N	UMBER	:			PAGE	38	OF 39					
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$\setminus$	NAME OF COMMITTEE (In Full)																
	DuPage Medical Group LTD PAC																
<u> </u>	Full Name (Last, First, Middle Initial)																
Α.	Roskam for Congress Committee		Date of Disbursement														
	Mailing Address PO Box 713		09 18 2014														
	City 5		Trans	sacti	on ID	: 2CD	50E25	52E1BI	D0A1AB4								
	Wheaton Purpose of Disbursement	IL 60187															
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$\backslash$	NAME OF COMMITTEE (In Full)																	
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Δ	Full Name (Last, First, Middle Initial) Citizens for Dan Cronin		Date	of D	ishurs	sen	nent											
				Date of Disbursement														
	Mailing Address 313 S Main St			0	9		25		2014									
	City S Lombard	State Zip Code IL 60148				Transaction ID : 12E9C7D3550CE95A85												
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