

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

Duckworth for Congress

ADDRESS (number and street) ▼

P.O. Box 59568

Check if different than previously reported. (ACC)

Schaumburg

IL

60159

2. FEC IDENTIFICATION NUMBER ▼

C C00498634

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

IL

08

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

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

- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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

Type or Print Name of Treasurer Nancy Chen

Signature of Treasurer Nancy Chen

[Electronically Filed]

Date

/  /

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Duckworth for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	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))....	53245.02	61959.50
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	53245.02	61959.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	75430.30	150743.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	271.98	271.98
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	75158.32	150471.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	100803.86	
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).....	93350.59	

**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 3 (Revised 12/2003)

Write or Type Committee Name

**Duckworth for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	14250.00	14500.00
(ii) Unitemized.....	3995.02	5959.50
(iii) TOTAL of contributions from individuals ▶	18245.02	20459.50
(b) Political Party Committees.....	0.00	5000.00
(c) Other Political Committees (such as PACs).....	35000.00	36500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	53245.02	61959.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	271.98	271.98
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	53517.00	62231.48

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	75430.30	150743.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	75430.30	150743.96

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	122717.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	53517.00
25. SUBTOTAL (add Line 23 and Line 24).....	176234.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	75430.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	100803.86

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

Please note this amendment is being filed to update the debt schedule from estimated to actual outstanding balances.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Casey**

Mailing Address 2659 N Orchard St

City Chicago State IL Zip Code 60614-1548

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

Name of Employer N/A Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2012

**Transaction ID : C4606512**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**William J Collins**

Mailing Address 415 S Ojibwa Trl

City Mount Prospect State IL Zip Code 60056-2931

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

Name of Employer Collins Electrical Contractor Occupation Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2012

**Transaction ID : C4606505**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Howard Rosset Conant Jr.**

Mailing Address 515 Greenleaf Ave

City Glencoe State IL Zip Code 60022-1705

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

Name of Employer Urban Innovations Occupation Architect

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 13 / 2012

**Transaction ID : C4606139**

Amount of Each Receipt this Period  
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin J Conlon**

Mailing Address 155 Laurel Ave

City State Zip Code  
Wilmette IL 60091-2830

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

Name of Employer Occupation  
Conlon & Dunn Public Strategies President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2012

**Transaction ID : C4606495**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Steven H DeVries**

Mailing Address 512 N McClurg Ct  
Apt 2105

City State Zip Code  
Chicago IL 60611-4117

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

Name of Employer Occupation  
Northwestern University Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 06 / 2012

**Transaction ID : C4604519**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Patrick Daley Dolan**

Mailing Address 222 N La Salle St  
Ste 300

City State Zip Code  
Chicago IL 60601-1013

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

Name of Employer Occupation  
Law Office of Patrick Daley Dolan Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 13 / 2012

**Transaction ID : C4606382**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ann Marie Dunlap**

Mailing Address 3001 S King Dr

City Chicago State IL Zip Code 60616-3345

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

Name of Employer Cermak Health Services -Retired Occupation Retired physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2012

**Transaction ID : C4606044**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Chris Dunn**

Mailing Address 1616 Highland Ave

City Wilmette State IL Zip Code 60091-2410

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

Name of Employer Conlon & Dunn Public Strategies Occupation Executive Vice President & Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2012

**Transaction ID : C4606499**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**James B Fadim**

Mailing Address 1448 N Lake Shore Dr  
18-C

City Chicago State IL Zip Code 60610

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

Name of Employer Conlon & Dunn Public Strategies Occupation Senior Vice President & General Course

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2012

**Transaction ID : C4606500**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>James Feldman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 14 / 2012
Mailing Address 180 E Pearson St		<b>Transaction ID : C4606496</b>
City Chicago	State IL Zip Code 60611-2130	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Jenner & Block LLP	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>Steven Kailes</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 13 / 2012
Mailing Address 3430 N Lake Shore Dr Apt 8L		<b>Transaction ID : C4606225</b>
City Chicago	State IL Zip Code 60657-2835	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>James Kaiser</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 14 / 2012
Mailing Address 5505 Grand Ave		<b>Transaction ID : C4606498</b>
City Western Springs	State IL Zip Code 60558	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Scheck and Siress	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edward Kearney**

Mailing Address 5414 Grand Ave

City Western Springs State IL Zip Code 60558

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 18 / 2012

**Transaction ID : C4607167**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Gerard Kelly**

Mailing Address 147 Prairie Ave

City Wilmette State IL Zip Code 60091-3346

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

Name of Employer Information Requested Occupation Information Requested  
 Sidley Austin LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 12 / 2012

**Transaction ID : C4606099**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael Lowe**

Mailing Address 55 W Burton Pl

City Chicago State IL Zip Code 60610-1409

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2012

**Transaction ID : C4606502**

Amount of Each Receipt this Period  
 250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Michael Marco**

Mailing Address 2121 Noyes St

City Evanston State IL Zip Code 60201-2557

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

Name of Employer Marco Consulting Group Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2012

**Transaction ID : C4606108**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**James Henry Martin**

Mailing Address 8322 S County Line Rd

City Burr Ridge State IL Zip Code 60527-6376

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

Name of Employer Lovell FHCC, North Chicago Occupation Emergency Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 22 / 2012

**Transaction ID : C4612668**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Sutera Martin**

Mailing Address 8322 Country Line Rd

City Burr Ridge State IL Zip Code 60527

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 22 / 2012

**Transaction ID : C4612669**

Amount of Each Receipt this Period  
 1500.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 47  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carrie McAteer-Fournier**

Mailing Address 5831 N Kirby Ave

City Chicago State IL Zip Code 60646-6626

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

Name of Employer DePaul Occupation Assoc Director of Internship Program

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 10 / 2012

**Transaction ID : C4605385**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles Murdock**

Mailing Address 2126 Thornwood Ave

City Wilmette State IL Zip Code 60091

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

Name of Employer Loyola University Occupation Law Professor

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2012

**Transaction ID : C4606503**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**James N Nowacki**

Mailing Address 708 Prospect Ave

City Winnetka State IL Zip Code 60093-2314

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

Name of Employer Kirkland & Ellis LLP Occupation Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 21 / 2012

**Transaction ID : C4610991**

Amount of Each Receipt this Period  
 1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alex Peric**

Mailing Address 4547 N Milwaukee Ave

City Chicago State IL Zip Code 60630-3742

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

Name of Employer Self Occupation Construction

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 10 / 2012

**Transaction ID : C4605569**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Margaret Kay Quigg**

Mailing Address 9105 Tulip Grove Rd

City Gaithersburg State MD Zip Code 20879-1858

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

Name of Employer Cape Fox Professional Services, LLC Occupation Sr Project Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2012

**Transaction ID : C4617254**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Joshua F Schwartz**

Mailing Address 4901 S Kimbark

City Chicago State IL Zip Code 60615

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

Name of Employer Retirement Plan Advisors Occupation Financial Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 14 / 2012

**Transaction ID : C4606497**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A. Murray Sprung**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1106 Mill Creek Dr

City Buffalo Grove	State IL	Zip Code 60089-4213
-----------------------	-------------	------------------------

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

Name of Employer Sprung Financial	Occupation CPA
--------------------------------------	-------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 31 / 2012

**Transaction ID : C4617149**

Amount of Each Receipt this Period  
250.00

**B. John Sugrue**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5638 N Artesian

City Chicago	State IL	Zip Code 60659
-----------------	-------------	-------------------

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

Name of Employer Law Offices of John P. Sugrue, P.C.	Occupation Attorney
---	------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 14 / 2012

**Transaction ID : C4606506**

Amount of Each Receipt this Period  
500.00

**C. Jeff P Todd**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5874 N Ridge Ave  
Apt 1

City Chicago	State IL	Zip Code 60660-5328
-----------------	-------------	------------------------

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

Name of Employer Prevent Blindness America	Occupation Chief Operating Officer
---	---------------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 06 / 2012

**Transaction ID : C4604521**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Vincent Krautkramer**

Mailing Address 651 S Sutton Rd  
# 186

City Streamwood State IL Zip Code 60107-2366

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

Name of Employer Netflix, Inc. Occupation Technician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 10 / 2012

**Transaction ID : C4635248**

Amount of Each Receipt this Period  
-250.00

**[MEMO ITEM]**  
\* Resignation of 11/3/12 contribution

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Vincent Krautkramer**

Mailing Address 651 S Sutton Rd  
# 186

City Streamwood State IL Zip Code 60107-2366

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

Name of Employer Netflix, Inc. Occupation Technician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 10 / 2012

**Transaction ID : C4635307**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\* Resignation

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

14250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AFLAC Incorporated PAC**

Mailing Address 1932 Wynnton Rd

City Columbus State GA Zip Code 31999-0001

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    General Debt

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : C4608186**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Aircraft Owners and Pilot's Association**

Mailing Address 421 Aviation Way

City Frederick State MD Zip Code 21701-4756

FEC ID number of contributing federal political committee. **C C00131185**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    General Debt

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2012

**Transaction ID : C4610992**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE**

Mailing Address 520 N. NORTHWEST HIGHWAY

City PARK RIDGE State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    General Debt

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2012

**Transaction ID : C4605968**

Amount of Each Receipt this Period  
 1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**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** C00100693

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 22 / 2012

**Transaction ID : C4612674**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 20 South Wacker Drive

City State Zip Code  
Chicago IL 60606

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 20 / 2012

**Transaction ID : C4608187**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 12 / 2012

**Transaction ID : C4605966**

Amount of Each Receipt this Period  
2500.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address 2980 FAIRVIEW PARK DRIVE

City State Zip Code  
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 22 / 2012

**Transaction ID : C4612673**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**General Electric**

Mailing Address 1299 Pennsylvania Ave, NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 18 / 2012

**Transaction ID : C4607168**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2012

**Transaction ID : C4617184**

Amount of Each Receipt this Period  
2000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 47
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**L-3 COMMUNICATIONS CORPORATION PAC**

Mailing Address 600 THIRD AVENUE

City NEW YORK State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C** C00338087

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 18 / 2012

**Transaction ID : C4607169**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**LEAGUE OF CONSERVATION VOTERS ACTION FUND**

Mailing Address 1920 L ST NW SUITE 800

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2012

**Transaction ID : C4608185**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 16011 NE 36TH WAY  
BOX 97017

City REDMOND State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2012

**Transaction ID : C4611056**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**MOTOROLA MOBILITY LLC POLITICAL ACTION COMMITTEE**

Mailing Address 1455 PENNSYLVANIA AVENUE, NW  
SUITE 900B

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00485789**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 22 / 2012

**Transaction ID : C4612672**

Amount of Each Receipt this Period  
 2000.00

**B. Full Name (Last, First, Middle Initial)**  
**MOTOROLA SOLUTIONS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1455 PENNSYLVANIA AVENUE, NW  
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00075341**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 03 / 2012

**Transaction ID : C4602262**

Amount of Each Receipt this Period  
 5000.00

**C. Full Name (Last, First, Middle Initial)**  
**PFIZER INC. PAC**

Mailing Address 235 EAST 42ND STREET

City NEW YORK State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C C00016683**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 17 / 2012

**Transaction ID : C4606850**

Amount of Each Receipt this Period  
 1000.00

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    General Debt

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2012

**Transaction ID : C4605463**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    General Debt

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2012

**Transaction ID : C4605967**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**National Cable & Telecommunications Association PAC**

Mailing Address 25 Massachusetts Ave NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)    General Debt

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 22 / 2012

**Transaction ID : C4612671A**

Amount of Each Receipt this Period  
 1000.00

\* Earmarked Contribution: See Below

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

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

Mailing Address 499 S Capitol St SW  
Ste 414

City Washington State DC Zip Code 20003-4009

FEC ID number of contributing federal political committee. **C** C00271338

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify) General Debt

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 22 / 2012

**Transaction ID : C4612671AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

35000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ali Donmez</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012		
Mailing Address 2696 Rust Drive			Amount of Each Disbursement this Period 920.66		
City Des Plaines	State IL	Zip Code 60018	Transaction ID : D353495		
Purpose of Disbursement Payroll		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Andre Peloquin</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012		
Mailing Address 4314 N. Mulligan D			Amount of Each Disbursement this Period 612.93		
City Chicago	State IL	Zip Code 60634	Transaction ID : D353503		
Purpose of Disbursement Payroll		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Anton Becker</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012		
Mailing Address 744 McCoy Rd			Amount of Each Disbursement this Period 1380.18		
City Franklin Lakes	State NJ	Zip Code 07417	Transaction ID : D353494		
Purpose of Disbursement Payroll		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2913.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Suites</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 200 C Street Southeast		Amount of Each Disbursement this Period 303.14 <b>Transaction ID : D353483</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Candidate Hotel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CFO - Compliance</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address One Park Row Fifth Floor		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : D353487</b>
City Providence State RI Zip Code 02903	Purpose of Disbursement Compliance Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address PO Box 3001		Amount of Each Disbursement this Period 252.84 <b>Transaction ID : D353482</b>
City Southeastern State PA Zip Code 19398-3001	Purpose of Disbursement Office Phones	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1805.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Commonwealth Edison</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address P.O. Box 805379			Amount of Each Disbursement this Period 184.73
City Chicago	State IL	Zip Code 60680-5379	
Purpose of Disbursement Office Utilities		Category/ Type	<b>Transaction ID : D353517</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. David Moskowitz</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 827 Seward HI			Amount of Each Disbursement this Period 651.59
City Evanston	State IL	Zip Code 60202	
Purpose of Disbursement Payroll		Category/ Type	<b>Transaction ID : D353501</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Stella Derby</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2012
Mailing Address 27431 Dersprings Wy			Amount of Each Disbursement this Period 495.00
City Los Altos Hills	State CA	Zip Code 94022	
Purpose of Disbursement Contrib. Refund		Category/ Type	<b>Transaction ID : D353461</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1331.32
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kelsey Druckman</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012
Mailing Address 1715 Park Dr		Amount of Each Disbursement this Period 822.56 <b>Transaction ID : D353469</b>
City Schaumburg	State IL	
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Kelsey Druckman</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 1715 Park Dr		Amount of Each Disbursement this Period 822.56 <b>Transaction ID : D353515</b>
City Schaumburg	State IL	
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Elizabeth Hegarty</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 10 Dunsinane Rd		Amount of Each Disbursement this Period 803.08 <b>Transaction ID : D353497</b>
City Brookfield	State CT	
Purpose of Disbursement Payroll		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2448.08
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kaitlin Fahey</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012	
Mailing Address 1777 Crystal Ln Unit 608			Amount of Each Disbursement this Period 2563.79	
City Mount Prospect	State IL	Zip Code 60056	Transaction ID : D353496	
Purpose of Disbursement Payroll	Category/ Type			
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Kaitlin Fahey</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012	
Mailing Address 1777 Crystal Ln Unit 608			Amount of Each Disbursement this Period 2563.78	
City Mount Prospect	State IL	Zip Code 60056	Transaction ID : D353470	
Purpose of Disbursement Payroll	Category/ Type			
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Kaitlin Fahey</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012	
Mailing Address 1777 Crystal Ln Unit 608			Amount of Each Disbursement this Period 9491.30	
City Mount Prospect	State IL	Zip Code 60056	Transaction ID : D353471	
Purpose of Disbursement Payroll	Category/ Type			
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14618.87
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 6447.15 <b>Transaction ID : D353488</b>
City Fort Lauderdale	State FL	
Zip Code 33340	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 2315.07 <b>Transaction ID : D353489</b>
City Fort Lauderdale	State FL	
Zip Code 33340	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 890.44 <b>Transaction ID : D353490</b>
City Fort Lauderdale	State FL	
Zip Code 33340	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9652.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 785.44
City Fort Lauderdale	State FL	
Zip Code 33340	Purpose of Disbursement Credit Card Processing Fee	<b>Transaction ID : D353491</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 71.27
City Fort Lauderdale	State FL	
Zip Code 33340	Purpose of Disbursement Credit Card Processing Fee	<b>Transaction ID : D353492</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. First Bank Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address P.O. Box 407066		Amount of Each Disbursement this Period 44.96
City Fort Lauderdale	State FL	
Zip Code 33340	Purpose of Disbursement Credit Card Processing Fee	<b>Transaction ID : D353493</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	901.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Abigail Galvin</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 2323 Preston Ln		Amount of Each Disbursement this Period 635.76 <b>Transaction ID : D353516</b>
City West Dundee	State IL	
Zip Code 60118-3535	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paul W Kohnstamm</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 1825 New Hampshire Ave NW Apt 801		Amount of Each Disbursement this Period 960.94 <b>Transaction ID : D353499</b>
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Paul W Kohnstamm</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012
Mailing Address 1825 New Hampshire Ave NW Apt 801		Amount of Each Disbursement this Period 960.93 <b>Transaction ID : D353473</b>
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2557.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Leah Israel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012
Mailing Address 655 W. Irving Park Rd #3617		Amount of Each Disbursement this Period 3919.25
City Chicago State IL Zip Code 60613	Transaction ID : D353472	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Leah Israel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 655 W. Irving Park Rd #3617		Amount of Each Disbursement this Period 2418.31
City Chicago State IL Zip Code 60613	Transaction ID : D353498	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Steven Lewis</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 421 Dodge Ave # B		Amount of Each Disbursement this Period 1032.19
City Evanston State IL Zip Code 60202-3253	Transaction ID : D353500	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7369.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 47		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Steven Lewis</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012
Mailing Address 421 Dodge Ave # B		Amount of Each Disbursement this Period 1687.00 <b>Transaction ID : D353474</b>
City Evanston State IL Zip Code 60202-3253	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 1101 15th Street NW		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : D353485</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Web Expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 1101 15th Street NW		Amount of Each Disbursement this Period 1470.00 <b>Transaction ID : D353506</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Web Expenses Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3857.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kevin Oakley</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012		
Mailing Address 6488 Havenwood Circle			Amount of Each Disbursement this Period 846.31		
City Huntington Beach	State CA	Zip Code 92648	Transaction ID : D353502		
Purpose of Disbursement Payroll		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. PayChex</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012		
Mailing Address 501 Wampanoag Trail			Amount of Each Disbursement this Period 6137.27		
City East Providence	State RI	Zip Code 02914	Transaction ID : D353507		
Purpose of Disbursement Payroll Tax		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. PayChex</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012		
Mailing Address 501 Wampanoag Trail			Amount of Each Disbursement this Period 72.30		
City East Providence	State RI	Zip Code 02914	Transaction ID : D353508		
Purpose of Disbursement Payroll Service Fee		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7055.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. PayChex</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>04</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		04		2012
M M	/	D D	/	Y Y Y Y								
12		04		2012								
Mailing Address 501 Wampanoag Trail		Amount of Each Disbursement this Period										
City	State Zip Code											
East Providence	RI 02914	<table border="1"> <tr> <td>399.00</td> </tr> </table>	399.00									
399.00												
Purpose of Disbursement	Category/Type	<b>Transaction ID : D353509</b>										
Employee Benefits												
Candidate Name												
Office Sought:	Disbursement For: 2012											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. PayChex</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>14</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		14		2012
M M	/	D D	/	Y Y Y Y								
12		14		2012								
Mailing Address 501 Wampanoag Trail		Amount of Each Disbursement this Period										
City	State Zip Code											
East Providence	RI 02914	<table border="1"> <tr> <td>158.00</td> </tr> </table>	158.00									
158.00												
Purpose of Disbursement	Category/Type	<b>Transaction ID : D353466</b>										
Employee Benefits												
Candidate Name												
Office Sought:	Disbursement For: 2012											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. PayChex</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>20</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		20		2012
M M	/	D D	/	Y Y Y Y								
12		20		2012								
Mailing Address 501 Wampanoag Trail		Amount of Each Disbursement this Period										
City	State Zip Code											
East Providence	RI 02914	<table border="1"> <tr> <td>8285.88</td> </tr> </table>	8285.88									
8285.88												
Purpose of Disbursement	Category/Type	<b>Transaction ID : D353477</b>										
Payroll Tax												
Candidate Name												
Office Sought:	Disbursement For: 2012											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>8842.88</td> </tr> </table>	8842.88
8842.88		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

**A. PayChex**

Full Name (Last, First, Middle Initial)

Mailing Address 501 Wampanoag Trail

City East Providence State RI Zip Code 02914

Purpose of Disbursement Payroll Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2012

Amount of Each Disbursement this Period: 63.70

Transaction ID : D353478

**B. PayChex**

Full Name (Last, First, Middle Initial)

Mailing Address 501 Wampanoag Trail

City East Providence State RI Zip Code 02914

Purpose of Disbursement Employee Benefits

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2012

Amount of Each Disbursement this Period: 599.00

Transaction ID : D353479

**c. Erik Polyak**

Full Name (Last, First, Middle Initial)

Mailing Address 3437 N Marshfield Ave #2

City Chicago State IL Zip Code 60657

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2012

Amount of Each Disbursement this Period: 822.56

Transaction ID : D353475

**SUBTOTAL** of Disbursements This Page (optional) ..... 1485.26

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Erik Polyak</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 3437 N Marshfield Ave #2		Amount of Each Disbursement this Period 822.56
City Chicago	State IL Zip Code 60657	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : D353504
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Eve Samborn</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 3125 Maple Leaf Dr.		Amount of Each Disbursement this Period 1194.31
City Glenview	State IL Zip Code 60026	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : D353505
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Eve Samborn</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012
Mailing Address 3125 Maple Leaf Dr.		Amount of Each Disbursement this Period 1194.31
City Glenview	State IL Zip Code 60026	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : D353476
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3211.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 47		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tollview LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 1566 West Algonquin Road		Amount of Each Disbursement this Period 1982.00
City Hoffman Estates	State IL Zip Code 60192	
Purpose of Disbursement Office Rent	Category/Type	<b>Transaction ID : D353481</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airline</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address P.O Box 66100		Amount of Each Disbursement this Period 5.00
City Chicago	State IL Zip Code 60666	
Purpose of Disbursement TRAVEL	Category/Type	<b>Transaction ID : D353463</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United Airline</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address P.O Box 66100		Amount of Each Disbursement this Period 605.60
City Chicago	State IL Zip Code 60666	
Purpose of Disbursement TRAVEL	Category/Type	<b>Transaction ID : D353464</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2592.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Healthcare</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2012
Mailing Address Department CH 10151		Amount of Each Disbursement this Period 2485.62 <b>Transaction ID : D353465</b>
City Palatine	State IL	
Zip Code 60055	Purpose of Disbursement Med Ins	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Utrecht &amp; Phillips</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 1900 M. Street, NW Suite 500		Amount of Each Disbursement this Period 1058.46 <b>Transaction ID : D353486</b>
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Legal Counsel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Paul W Kohnstamm</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address 1825 New Hampshire Ave NW Apt 801		Amount of Each Disbursement this Period 246.45 <b>Transaction ID : D353460</b>
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3790.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paul W Kohnstamm</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address 1825 New Hampshire Ave NW Apt 801		Amount of Each Disbursement this Period 35.00
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Travel Reimbursement (Parking)	Transaction ID : D354227
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kaitlin Fahey</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2012
Mailing Address 1777 Crystal Ln Unit 608		Amount of Each Disbursement this Period 498.81
City Mount Prospect	State IL	
Zip Code 60056	Purpose of Disbursement Reimbursement	Transaction ID : D353462
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Stonewood Ale House</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2012
Mailing Address 601 Mall Dr		Amount of Each Disbursement this Period 320.00
City Schaumburg	State IL	
Zip Code 60173	Purpose of Disbursement Meals	Transaction ID : D354292
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	498.81
<b>TOTAL</b> This Period (last page this line number only).....	74933.99

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Duckworth for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Ali Donmez**

Mailing Address 2696 Rust Drive

City State Zip Code  
 Des Plaines IL 60018

Nature of Debt (Purpose):  
 Payroll

Outstanding Balance Beginning This Period **Transaction ID : D347507**  
 920.66

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
 0.00 920.66 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Andre Peloquin**

Mailing Address 4314 N. Mulligan D

City State Zip Code  
 Chicago IL 60634

Nature of Debt (Purpose):  
 Payroll

Outstanding Balance Beginning This Period **Transaction ID : D347517**  
 612.93

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
 0.00 612.93 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Anton Becker**

Mailing Address 744 McCoy Rd

City State Zip Code  
 Franklin Lakes NJ 07417

Nature of Debt (Purpose):  
 Payroll

Outstanding Balance Beginning This Period **Transaction ID : D347506**  
 1380.18

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
 0.00 1380.18 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 41 OF 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Duckworth for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Blue State Digital</b>	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 406 7th Street NW 3rd Floor	
City State Zip Code Washington DC 20004	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D354295</b>	
Amount Incurred This Period 1700.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1700.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CFO - Compliance</b>	Nature of Debt (Purpose): Compliance Consulting
Mailing Address One Park Row Fifth Floor	
City State Zip Code Providence RI 02903	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D354296</b>	
Amount Incurred This Period 1250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>David Moskowitz</b>	Nature of Debt (Purpose): Payroll
Mailing Address 827 Seward HI	
City State Zip Code Evanston IL 60202	

Outstanding Balance Beginning This Period 651.59	<b>Transaction ID : D347515</b>	
Amount Incurred This Period 0.00	Payment This Period 651.59	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	2950.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kelsey Druckman</b>	Nature of Debt (Purpose): Payroll
Mailing Address 1715 Park Dr	
City State Zip Code Schaumburg IL 60194-4016	

Outstanding Balance Beginning This Period 822.56	<b>Transaction ID : D347508</b>	
Amount Incurred This Period 0.00	Payment This Period 822.56	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Elizabeth Hegarty</b>	Nature of Debt (Purpose): Payroll
Mailing Address 10 Dunsinane Rd	
City State Zip Code Brookfield CT 06804	

Outstanding Balance Beginning This Period 803.08	<b>Transaction ID : D347511</b>	
Amount Incurred This Period 0.00	Payment This Period 803.08	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kaitlin Fahey</b>	Nature of Debt (Purpose): Payroll
Mailing Address 1777 Crystal Ln Unit 608	
City State Zip Code Mount Prospect IL 60056	

Outstanding Balance Beginning This Period 2563.79	<b>Transaction ID : D347509</b>	
Amount Incurred This Period 0.00	Payment This Period 2563.79	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Duckworth for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Abigail Galvin**

Mailing Address 2323 Preston Ln

City State Zip Code  
 West Dundee IL 60118-3535

Nature of Debt (Purpose):  
 Payroll

Outstanding Balance Beginning This Period **Transaction ID : D347510**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Leah E Israel**

Mailing Address 655 W. Irving Park Rd #3617

City State Zip Code  
 Chicago IL 60613

Nature of Debt (Purpose):  
 Payroll

Outstanding Balance Beginning This Period **Transaction ID : D347512**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Kevin Oakley**

Mailing Address 204 East St. James Street #204

City State Zip Code  
 Arlington Heights IL 60004

Nature of Debt (Purpose):  
 Payroll

Outstanding Balance Beginning This Period **Transaction ID : D347516**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Duckworth for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Paul W Kohnstamm**

Mailing Address 1825 New Hampshire Ave NW  
Apt 801

City State Zip Code  
Washington DC 20009

Nature of Debt (Purpose):  
Payroll

Outstanding Balance Beginning This Period **Transaction ID : D347513**  
960.94

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 960.94 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Steven Lewis**

Mailing Address 421 Dodge Ave  
# B

City State Zip Code  
Evanston IL 60202-3253

Nature of Debt (Purpose):  
Payroll

Outstanding Balance Beginning This Period **Transaction ID : D347514**  
1032.19

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 1032.19 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**NGP VAN, Inc.**

Mailing Address 1101 15th Street NW

City State Zip Code  
Washington DC 20005

Nature of Debt (Purpose):  
Web Expenses

Outstanding Balance Beginning This Period **Transaction ID : D354293**  
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
700.00 0.00 700.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	700.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Duckworth for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**PayChex**

Nature of Debt (Purpose):  
Payroll Service Fee

Mailing Address 501 Wampanoag Trail

City State Zip Code  
East Providence RI 02914

Outstanding Balance Beginning This Period

72.30

**Transaction ID : D347521**

Amount Incurred This Period

0.00

Payment This Period

72.30

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**PayChex**

Nature of Debt (Purpose):  
Employee Benefits

Mailing Address 501 Wampanoag Trail

City State Zip Code  
East Providence RI 02914

Outstanding Balance Beginning This Period

399.00

**Transaction ID : D347522**

Amount Incurred This Period

0.00

Payment This Period

399.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**PayChex**

Nature of Debt (Purpose):  
Payroll Tax

Mailing Address 501 Wampanoag Trail

City State Zip Code  
East Providence RI 02914

Outstanding Balance Beginning This Period

6137.27

**Transaction ID : D347524**

Amount Incurred This Period

0.00

Payment This Period

6137.27

Outstanding Balance at Close of This Period

0.00

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Duckworth for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Erik Polyak**

Nature of Debt (Purpose):  
Payroll

Mailing Address 3437 N Marshfield Ave #2

City State Zip Code  
Chicago IL 60657

Outstanding Balance Beginning This Period

822.56

Transaction ID : D347519

Amount Incurred This Period

0.00

Payment This Period

822.56

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Eve Samborn**

Nature of Debt (Purpose):  
Payroll

Mailing Address 3125 Maple Leaf Dr.

City State Zip Code  
Glenview IL 60026

Outstanding Balance Beginning This Period

1194.31

Transaction ID : D347520

Amount Incurred This Period

0.00

Payment This Period

1194.31

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Snyder Pickerill Media Group**

Nature of Debt (Purpose):  
TV/Cable Buy

Mailing Address 2226 West Walnut

City State Zip Code  
Chicago IL 60612

Outstanding Balance Beginning This Period

39694.40

Transaction ID : D347525

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

39694.40

- 1) **SUBTOTALS** This Period This Page (optional) .....
- 2) **TOTALS** This Period (last page this line number only) .....
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Duckworth for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Strategy Group, Inc.</b>		Nature of Debt (Purpose): Direct Mail
Mailing Address 1603 Orrington Ave Ste 1730		
City State	Zip Code	
Evanston IL	60201-5017	

Outstanding Balance Beginning This Period	<b>Transaction ID : D347526</b>	
48978.19		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	48978.19

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>United Healthcare</b>		Nature of Debt (Purpose): Health Insurance
Mailing Address Department CH 10151		
City State	Zip Code	
Palatine IL	60055	

Outstanding Balance Beginning This Period	<b>Transaction ID : D347527</b>	
2485.62		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	2485.62	0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Utrecht &amp; Phillips</b>		Nature of Debt (Purpose): Legal Services
Mailing Address 1900 M. Street, NW Suite 500		
City	State	Zip Code
Washington	DC	20036

Outstanding Balance Beginning This Period	<b>Transaction ID : D354294</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1028.00	0.00	1028.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	50006.19
2) <b>TOTALS</b> This Period (last page this line number only) .....	93350.59
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	93350.59