

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
CITIZENS FOR RUSH

ADDRESS (number and street) P. O. Box 7292
 Check if different than previously reported. (ACC) CHICAGO IL 60680-7292

2. **FEC IDENTIFICATION NUMBER** C C00257121 CITY STATE ZIP CODE STATE DISTRICT
3. IS THIS REPORT NEW (N) **OR** AMENDED (A) IL 01

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 M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 04 / 01 / 2014 through M M / D D / Y Y Y Y 06 / 30 / 2014

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 Sheila L. Jackson
Signature of Treasurer Sheila L. Jackson *[Electronically Filed]* Date M M / D D / Y Y Y Y 07 / 29 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
CITIZENS FOR RUSH

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))....	27630.00	260531.00
(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)).....	27630.00	260531.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	38443.61	138474.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38443.61	138474.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	44637.13	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	25589.43	

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

CITIZENS FOR RUSH

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1000.00	22150.00
(ii) Unitemized.....	130.00	881.00
(iii) TOTAL of contributions from individuals ▶	1130.00	23031.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	26500.00	237500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	27630.00	260531.00
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.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	27630.00	260531.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	38443.61	138474.81
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	3200.00	128450.41
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	41643.61	266925.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	58650.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	27630.00
25. SUBTOTAL (add Line 23 and Line 24).....	86280.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41643.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	44637.13

**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 5 OF 26
	<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)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
DICKSTEINSHAPIRO LLP

Mailing Address 1825 Eye Street, NW

City Washington State DC Zip Code 20006-5403

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11Al.16589

Amount of Each Receipt this Period
 9566.00

Exempt Legal Services by Thomas, Scott and Ghosh, Aimee; Various Dates
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Scott Thomas

Mailing Address 7041 Wyndale St., N.W.

City Washington State DC Zip Code 20015

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

Name of Employer Occupation
 Dickstein Shapiro LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11Al.16516

Amount of Each Receipt this Period
 1000.00

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).....

1000.00

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 6 OF 26
	<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)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 777 6TH STREET, NW
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11C.16513

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 80 F STREET N W

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00009936

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2014

Transaction ID : SA11C.16484

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE (AHCA-PAC)

Mailing Address 1201 L STREET NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11C.16529

Amount of Each Receipt this Period
2500.00

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 7 OF 26
	<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)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE (AHAPAC)

Mailing Address 325 7TH STREET NW

City State Zip Code
WASHINGTON DC 20007

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11C.16511

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN PODIATRIC MEDICAL ASSN. INC. PODIATRY POLITICAL ACTION COMMITTEE

Mailing Address 9312 Old Georgetown Road

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11C.16508

Amount of Each Receipt this Period
2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 175 E. Houston Street
Room 7-A-50

City State Zip Code
San Antonio TX 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11C.16530

Amount of Each Receipt this Period
1000.00

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

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

5000.00

**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 26
	<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)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
CATERPILLAR EMPLOYEE POLITICAL ACTION COMMITTEE, THE

Mailing Address 100 N.E. Adams

City Peoria State IL Zip Code 61629

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11C.16531

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
CME/PAC CHICAGO MERCANTILE EXCHANGE PAC

Mailing Address 30 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11C.16521

Amount of Each Receipt this Period
 1500.00

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

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11C.16532

Amount of Each Receipt this Period
 1000.00

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 9 OF 26
	<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)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial)
COX ENTERPRISES PAC (COXPAC) INC.

Mailing Address 975 F STREET, NW
SUITE 300

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00477653**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11C.16512

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
HEALTH CARE SERVICE CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 300 E. Randolph
Legal Dept.

City Chicago State IL Zip Code 60601

FEC ID number of contributing federal political committee. **C C00199711**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 22 / 2014

Transaction ID : SA11C.16520

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
IRONWORKERS POLITICAL ACTION LEAGUE

Mailing Address 1750 NY AVE, NW SUITE 400

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00027359**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : SA11C.16519

Amount of Each Receipt this Period
1000.00

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

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

5000.00

**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 10 OF 26
	<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)
CITIZENS FOR RUSH

A. 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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11C.16522

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11C.16533

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

Mailing Address 25 Massachusetts Ave. NW
Ste 100

City WASHINGTON State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11C.16523

Amount of Each Receipt this Period
1500.00

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

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

4000.00

**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 26
	<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)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial)
PHILIPS ELECTRONICS NORTH AMERICA CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE

A. Mailing Address 1050 K STREET, NW
SUITE 900

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00239780

Name of Employer Occupation

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
 06 / 11 / 2014

Transaction ID : SA11C.16514

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

B. Mailing Address 317 MASSACHUSETTS AVENUE NE

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11C.16528

Amount of Each Receipt this Period
1500.00

Full Name (Last, First, Middle Initial)
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I

C. Mailing Address 1900 K STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2014

Transaction ID : SA11C.16509

Amount of Each Receipt this Period
2500.00

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

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

4500.00

26500.00

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 12 OF 26	
	<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)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. Allstate Insurance Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address Not Available		Amount of Each Disbursement this Period 106.04 Transaction ID : SB17.16535
City Chicago	State IL	
Zip Code 60600	Purpose of Disbursement Automobile Insurance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Allstate Insurance Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address Not Available		Amount of Each Disbursement this Period 106.04 Transaction ID : SB17.16537
City Chicago	State IL	
Zip Code 60600	Purpose of Disbursement Automobile Insurance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Allstate Insurance Company		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address Not Available		Amount of Each Disbursement this Period 106.04 Transaction ID : SB17.16543
City Chicago	State IL	
Zip Code 60600	Purpose of Disbursement AUTOMOBILE INSURNCE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	318.12
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 13 OF 26			
	<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)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014		
Mailing Address 499 South Capitol Street SW Suite 422			Amount of Each Disbursement this Period 8861.81		
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.16548		
Purpose of Disbursement FUND RAISING CONSUTANT FEE FEB., MAR, & APR.		Category/Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014		
Mailing Address 499 South Capitol Street SW Suite 422			Amount of Each Disbursement this Period 12139.09		
City Washington	State DC	Zip Code 20003	Transaction ID : SB17.16556		
Purpose of Disbursement Fundrasing Consultant		Category/Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. A T & T			Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014		
Mailing Address Bill Payment Center			Amount of Each Disbursement this Period 289.57		
City Chicago	State IL	Zip Code 60600	Transaction ID : SB17.16536		
Purpose of Disbursement Mobil Telephne Service		Category/Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	21290.47
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 14 OF 26			
	<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)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. A T & T		Date of Disbursement MM / DD / YYYY 05 / 27 / 2014
Mailing Address Bill Payment Center		Amount of Each Disbursement this Period 291.94 Transaction ID : SB17.16542
City Chicago	State IL Zip Code 60600	
Purpose of Disbursement MOBIL TELEPHONE SERVICE	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. A T & T		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address Bill Payment Center		Amount of Each Disbursement this Period 289.57 Transaction ID : SB17.16540
City Chicago	State IL Zip Code 60600	
Purpose of Disbursement MOBIL TELEPHONE SERVICE	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Grand Events. Inc.		Date of Disbursement MM / DD / YYYY 05 / 22 / 2014
Mailing Address 4828 S. Michigan Ave.		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.16555
City Chicago	State IL Zip Code 60615	
Purpose of Disbursement Event Cccrdinator	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2581.51
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 15 OF 26			
	<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)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. Sheila L. Jackson		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address P.O. Box 7292		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.16549
City Chicago State IL Zip Code 60680-7292	Purpose of Disbursement Accounting Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Sheila L. Jackson		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address P.O. Box 7292		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.16551
City Chicago State IL Zip Code 60680-7292	Purpose of Disbursement Accounting Fee April Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Sheila L. Jackson		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address P.O. Box 7292		Amount of Each Disbursement this Period 550.00 Transaction ID : SB17.16554
City Chicago State IL Zip Code 60680-7292	Purpose of Disbursement Accounting Fee June Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1650.00
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 16 OF 26	
	<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)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address 30 Ivy Street, S.E.		Amount of Each Disbursement this Period 2594.22 Transaction ID : SB17.16557
City Washington	State DC	
Zip Code 20003-4071	Purpose of Disbursement Townhouse rental & catering	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Carolyn A. Rush		Date of Disbursement MM / DD / YYYY 05 / 06 / 2014
Mailing Address 3534 S. Calumet Ave.		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.16561
City Chicago	State IL	
Zip Code 60653	Purpose of Disbursement Consultant Fee April & May, 2014	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Carolyn A. Rush		Date of Disbursement MM / DD / YYYY 06 / 07 / 2014
Mailing Address 3534 S. Calumet Ave.		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.16558
City Chicago	State IL	
Zip Code 60653	Purpose of Disbursement Consulting Fee - June	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	10094.22
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 17 OF 26			
	<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)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. Laval Sanks		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address Not Available		Amount of Each Disbursement this Period 1600.00 Transaction ID : SB17.16565
City Washington	State DC	
Zip Code 20000	Purpose of Disbursement Services Rendered	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. United Storage		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 2541 S. King Drive		Amount of Each Disbursement this Period 739.00 Transaction ID : SB17.16562
City Chicago	State IL	
Zip Code 60616	Purpose of Disbursement Storage Unit 3/1/14 - 6/30/14	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Urban Partnership Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 19260		Amount of Each Disbursement this Period 19.91 Transaction ID : SB17.16538
City Chicago	State IL	
Zip Code 60619-0260	Purpose of Disbursement BANK SERVICE CHARGES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2358.91
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 18 OF 26			
	<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)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. Urban Partnership Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 19260		Amount of Each Disbursement this Period 17.25 Transaction ID : SB17.16544
City Chicago State IL Zip Code 60619-0260	Purpose of Disbursement BANK SERVICE CHARGES Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Urban Partnership Bank		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO Box 19260		Amount of Each Disbursement this Period 21.13 Transaction ID : SB17.16541
City Chicago State IL Zip Code 60619-0260	Purpose of Disbursement BANK SERVICE CHARGES Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	38.38
TOTAL This Period (last page this line number only).....	38331.61

**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 19 OF 26	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

Full Name (Last, First, Middle Initial) A. CALUMET TOWNSHIP REGULAR DEMOCRATIC PARTY		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 2030 High Street		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.16546
City Blue Island State IL Zip Code 60406-2502	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name CITIZENS FOR RUSH	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 01		

Full Name (Last, First, Middle Initial) B. FIRST JURISDICTION - ILLINOIS		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 1233 West 109th Place Office of the Bishop		Amount of Each Disbursement this Period 700.00 Transaction ID : SB21.16567
City Chicago State IL Zip Code 60643	Purpose of Disbursement Donation - 20 Tickets @ \$35.00 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. RANGEL FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address PO Box 5577 MANHATTANVILLE STA		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB21.16559
City New York State NY Zip Code 10027	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2014	
State: NY District: 15		

SUBTOTAL of Disbursements This Page (optional).....	3200.00
TOTAL This Period (last page this line number only).....	3200.00

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)

CITIZENS FOR RUSH

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

Mailing Address 3901 S. Michigan Avenue

City State Zip Code
 Chicago IL 60653

Nature of Debt (Purpose):
 Space Rental

Outstanding Balance Beginning This Period **Transaction ID : SD10.2928**

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
Apostolic Faith Church

Mailing Address 3823 S. Indiana Ave.

City State Zip Code
 Chicago IL 60653

Nature of Debt (Purpose):
 Refund

Outstanding Balance Beginning This Period **Transaction ID : SD10.457**

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
A T & T

Mailing Address Bill Payment Center

City State Zip Code
 Chicago IL 60600

Nature of Debt (Purpose):
 LONG DISTANCE

Outstanding Balance Beginning This Period **Transaction ID : SD10.2909**

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

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3118.61"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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

NAME OF COMMITTEE (In Full)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Leah Bloomenthal		Nature of Debt (Purpose): Office Supplies
Mailing Address 6325 N. Sheridan		
City	State	Zip Code
Chicago	IL	60647

Outstanding Balance Beginning This Period	Transaction ID : SD10.458	
<input type="text" value="62.40"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="62.40"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chubb Group Insurance Companies		Nature of Debt (Purpose): Insurance
Mailing Address 30 N. LaSalle Suite 3510		
City	State	Zip Code
Chicago	IL	60602

Outstanding Balance Beginning This Period	Transaction ID : SD10.2924	
<input type="text" value="1910.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1910.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Citizens for Gary Lapille		Nature of Debt (Purpose): Refund
Mailing Address P.O. Box 64665		
City	State	Zip Code
Chicago	IL	60664-1664

Outstanding Balance Beginning This Period	Transaction ID : SD10.459	
<input type="text" value="2000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3972.40"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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)

CITIZENS FOR RUSH

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

ComEd

Nature of Debt (Purpose):
Electricity

Mailing Address Bill Payment Center

City State Zip Code
Chicago IL 60600

Outstanding Balance Beginning This Period

9.96

Transaction ID : SD10.8787

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9.96

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

Friends of Bobby Rush

Nature of Debt (Purpose):
Estimated Debt for Space usage. Actual amount To Be Determined'

Mailing Address P.O. Box 7292

City State Zip Code
Chicago IL 60680-7292

Outstanding Balance Beginning This Period

2100.00

Transaction ID : SD10.16392

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2100.00

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

Grainger Terry, Inc.

Nature of Debt (Purpose):
Printing & Mailing

Mailing Address 1965 W. Pershing Road
Building A, 3rd Floor

City State Zip Code
Chicago IL 60609

Outstanding Balance Beginning This Period

6890.00

Transaction ID : SD10.11451

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6890.00

1) **SUBTOTALS** This Period This Page (optional) ▶

8999.96

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)

CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Charisse Hodges		Nature of Debt (Purpose): Salary
Mailing Address 3348 S. Giles Ave.		
City	State	Zip Code
Chicago	IL	60616

Outstanding Balance Beginning This Period	Transaction ID : SD10.460	
<input type="text" value="850.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="850.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor James Biery Communications		Nature of Debt (Purpose): Public Relations Fee
Mailing Address 435 W. Wisconsin		
City	State	Zip Code
Chicago	IL	60614

Outstanding Balance Beginning This Period	Transaction ID : SD10.461	
<input type="text" value="1000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lori Ann Bass & Associates		Nature of Debt (Purpose): Fundraising Fee
Mailing Address 730 N. Franklin		
City	State	Zip Code
Chicago	IL	60611

Outstanding Balance Beginning This Period	Transaction ID : SD10.462	
<input type="text" value="94.54"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="94.54"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1944.54"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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)

CITIZENS FOR RUSH

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

Gil N. McCoy

Nature of Debt (Purpose):
Refund

Mailing Address 5210 S. Blackstone

City State Zip Code
Chicago IL 60615

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.451

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

People's Energy

Nature of Debt (Purpose):
Heating Fuel

Mailing Address Bill Payment Center

City State Zip Code
Chicago IL 60600

Outstanding Balance Beginning This Period

1403.92

Transaction ID : SD10.8788

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1403.92

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

Progressive Land Developers

Nature of Debt (Purpose):
Office Rent

Mailing Address 7801 S. Cottage Grove

City State Zip Code
Chicago IL 60619

Outstanding Balance Beginning This Period

1400.00

Transaction ID : SD10.452

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1400.00

- 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) ▶

3803.92

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

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trib-Co Construction		Nature of Debt (Purpose): Refund
Mailing Address 500 West Monroe		
City	State	Zip Code
Chicago	IL	60661

Outstanding Balance Beginning This Period	Transaction ID : SD10.453	
<input type="text" value="300.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="300.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trilla Stell Drum Corp.		Nature of Debt (Purpose): Refund
Mailing Address 2959 West 47th Street		
City	State	Zip Code
Chicago	IL	60632

Outstanding Balance Beginning This Period	Transaction ID : SD10.454	
<input type="text" value="200.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="200.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Vision, Health Mgmt Systems		Nature of Debt (Purpose): REfund
Mailing Address 2838 S. Indiana		
City	State	Zip Code
Chicago	IL	60616

Outstanding Balance Beginning This Period	Transaction ID : SD10.455	
<input type="text" value="250.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="250.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="750.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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

NAME OF COMMITTEE (In Full)
CITIZENS FOR RUSH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Robert Wright		Nature of Debt (Purpose): Salary
Mailing Address 1212 S. Michigan		
City State Zip Code Chicago IL 60609		

Outstanding Balance Beginning This Period 3000.00		Transaction ID : SD10.456	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

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

1) SUBTOTALS This Period This Page (optional)	3000.00
2) TOTALS This Period (last page this line number only)	25589.43
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	25589.43