

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
New Trier Democratic Organization

ADDRESS (number and street) 800 Oak St.
 Check if different than previously reported. (ACC)
Winnetka IL 60093

2. **FEC IDENTIFICATION NUMBER** C00422519
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2010 through 07 31 2010

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 Daniel M. Kaplan

Signature of Treasurer Electronically Filed by Daniel M. Kaplan Date 08 14 2010

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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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
New Trier Democratic Organization

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		26372.33
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	17247.12									
(c) Total Receipts (from Line 19)	4372.97	32555.53								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	21620.09	58927.86								
7. Total Disbursements (from Line 31)	6405.87	43713.64								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	15214.22	15214.22								
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)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
New Trier Democratic Organization

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3065.00	24020.95
(ii) Unitemized	285.00	2820.36
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3350.00	26841.31
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3350.00	26841.31
12. Transfers From Affiliated/Other Party Committees	300.00	300.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	722.97	922.77
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	4491.45
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	4491.45
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	4372.97	32555.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4372.97	28064.08

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	562.85	2739.81
(ii) Non-Federal Share.....	2117.40	10286.93
(b) Other Federal Operating Expenditures.....	2372.75	13190.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	5053.00	26217.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	350.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	2581.35
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	1352.87	4565.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	1352.87	4565.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6405.87	43713.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4288.47	33426.71

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	3350.00	26841.31
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3350.00	26841.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2935.60	15930.36
37. Offsets to Operating Expenditures (from Line 15, page 3)	722.97	922.77
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2212.63	15007.59

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)

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

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)
New Trier Democratic Organization

A.

Full Name (Last, First, Middle Initial)
Philip Corboy

Mailing Address 26 Woodley Rd

City State Zip Code
Winnetka IL 60093

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

Name of Employer Corboy & Associates Occupation attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 26 / 2010

Transaction ID: SA11AI.6970

Amount of Each Receipt this Period
1000.00

Sustaining Member

B.

Full Name (Last, First, Middle Initial)
Robert Drucker

Mailing Address 714 Forest

City State Zip Code
Wilmette IL 60091

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 02 / 2010

Transaction ID: SA11AI.6953

Amount of Each Receipt this Period
300.00

Sustaining Member

C.

Full Name (Last, First, Middle Initial)
Geoff Higgins

Mailing Address 329 Woodland

City State Zip Code
Winnetka IL 60093

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2010

Transaction ID: SA11AI.6965

Amount of Each Receipt this Period
400.00

Sustaining Member

SUBTOTAL of Receipts This Page (optional) ► 1700.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial)
Less than \$200 Individual

Mailing Address

City State Zip Code
IL

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.24

Date of Receipt
07 / 02 / 2010

Transaction ID: SA11AI.6954

Amount of Each Receipt this Period
95.00

B. Full Name (Last, First, Middle Initial)
Less than \$200 Individual

Mailing Address

City State Zip Code
IL

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
655.24

Date of Receipt
07 / 07 / 2010

Transaction ID: SA11AI.6962

Amount of Each Receipt this Period
50.00

Contributing Member

C. Full Name (Last, First, Middle Initial)
Less than \$200 Individual

Mailing Address

City State Zip Code
IL

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.24

Date of Receipt
07 / 30 / 2010

Transaction ID: SA11AI.6972

Amount of Each Receipt this Period
20.00

Contributing Member

SUBTOTAL of Receipts This Page (optional) 165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 17
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

<p>A. Full Name (Last, First, Middle Initial) Corrine Lane</p> <p>Mailing Address 1092 Bluff</p> <p>City State Zip Code Glencoe IL 60022</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation None</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2010</p> <p>Transaction ID: SA11AI.6968</p> <p>Amount of Each Receipt this Period 300.00</p> <p>Sustaining Member</p>
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<p>B. Full Name (Last, First, Middle Initial) Mary Ann Savard</p> <p>Mailing Address 802 Ashland</p> <p>City State Zip Code Wilmette IL 60091</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer homemaker Occupation homemaker</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2010</p> <p>Transaction ID: SA11AI.6969</p> <p>Amount of Each Receipt this Period 300.00</p> <p>Sustaining Member</p>
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<p>C. Full Name (Last, First, Middle Initial) Lloyd Shore</p> <p>Mailing Address 7050 Arbor Lane</p> <p>City State Zip Code Winnetka IL 60093</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer retired Occupation None</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2010</p> <p>Transaction ID: SA11AI.6963</p> <p>Amount of Each Receipt this Period 300.00</p> <p>Sustaining Member</p>
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SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 9 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A.

Full Name (Last, First, Middle Initial) Ann Wolf		Date of Receipt
Mailing Address 915 Fisher Lane		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
City	State	Zip Code
Winnetka	IL	60093
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.6956
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer Retired	Occupation Retired	Sustaining Member
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3065.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 10 / 17	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) New Trier Democratic Organization
--

A.	Full Name (Last, First, Middle Initial) SCHAKOWSKY FOR CONGRESS		Date of Receipt			
	Mailing Address P.O. BOX 5130		M M / D D / Y Y Y Y 07 / 07 / 2010			
	City	State	Zip Code	Transaction ID: SA12.6960		
	EVANSTON	IL	60204	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C C00327023		300.00	
	Name of Employer		Occupation		Sustaining Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		300.00		

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A.

Full Name (Last, First, Middle Initial) AT&T		Date of Receipt
Mailing Address Bill Payment Center		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 29 / 2010
City	State	Zip Code
Saginaw	MI	48663
FEC ID number of contributing federal political committee.		Transaction ID: SA15.6995
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text"/> 722.97
Occupation		Refund for 2009 over charges
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 722.97

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 722.97
TOTAL This Period (last page this line number only)	<input type="text"/> 722.97

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A.	Full Name (Last, First, Middle Initial) AT&T Mailing Address Bill Payment Center City State Zip Code Saginaw MI 48663 Purpose of Disbursement Telephone expenses Candidate Name 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) ▼	Transaction ID: SB21B.6996 Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2010 Amount of Each Disbursement this Period 722.97 001 Category/ Type	
B.	Full Name (Last, First, Middle Initial) Nalani McClendon Mailing Address 628 Dundee Road City State Zip Code Glencoe IL 60022 Purpose of Disbursement Office manager Candidate Name 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) ▼	Transaction ID: SB21B.6982 Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2010 Amount of Each Disbursement this Period 352.74 001 Category/ Type	
C.	Full Name (Last, First, Middle Initial) Nalani McClendon Mailing Address 628 Dundee Road City State Zip Code Glencoe IL 60022 Purpose of Disbursement Office manager Candidate Name 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) ▼	Transaction ID: SB21B.6992 Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2010 Amount of Each Disbursement this Period 365.21 001 Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶

1440.92

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 17

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

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NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A.	Full Name (Last, First, Middle Initial) Nalani McClendon	Transaction ID: SB21B.6983
	Mailing Address 628 Dundee Road	Date of Disbursement 07 / 31 / 2010
	City Glencoe State IL Zip Code 60022	Amount of Each Disbursement this Period 352.74
	Purpose of Disbursement Office manager Candidate Name	001 Category/ Type
	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) ▼
B.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: SB21B.6984
	Mailing Address P.O. Box 1269	Date of Disbursement 07 / 12 / 2010
	City Charlotte State NC Zip Code 28201-1269	Amount of Each Disbursement this Period 375.00
	Purpose of Disbursement Withholding & payroll taxes Candidate Name	001 Category/ Type
	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) ►

727.74

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

2168.66

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 17

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

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NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) Michael Deeheeger Mailing Address 321 Sunset Road City Winnetka State IL Zip Code 60091 Purpose of Disbursement Campaign coordinator Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.6977 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 676.46 Category/Type 001
B. Full Name (Last, First, Middle Initial) Michael Deeheeger Mailing Address 321 Sunset Road City Winnetka State IL Zip Code 60091 Purpose of Disbursement Campaign coordinator Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.6975 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period 676.41 Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ►

1352.87

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

1352.87

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 New Trier Democratic Organization

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- X Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative Generic Voter Drive Public Communications Referencing Party Only

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) Schermerhorn & Co			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2737 Central Street			Allocated Activity or Event Year-To-Date 11111.49	
City State Zip Code Evanston IL 60091	Category/ Type 001		Date M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 1 0	
Purpose of Disbursement: Office rent			Transaction ID: H4.6978	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
244.65		920.35		1165.00

B. Full Name (Last, First, Middle Initial) Chase Cards			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 15153			Allocated Activity or Event Year-To-Date 11537.21	
City State Zip Code Wilmington DE 19886	Category/ Type 001		Date M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 1 0	
Purpose of Disbursement: Administrative expenses			Transaction ID: H4.6986	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.40		336.32		425.72

C. Full Name (Last, First, Middle Initial) Pioneer Press			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3701 W. Lake Ave.			Allocated Activity or Event Year-To-Date 0.00	
City State Zip Code Glenview IL 60025	Category/ Type 004		Date M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 1 0	
Purpose of Disbursement: Ad & Listing - Wilmette Community Guide			Transaction ID: H4.6987	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.15		169.85		215.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
334.05		1256.67		1590.72

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) Constant Contact			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1601 Trapelo Road Suite 329			Allocated Activity or Event Year-To-Date 0.00		
City State Zip Code Waltham MA 02541	Category/ Type 001		Date ^{M M} / ^{D D} / ^{Y Y Y Y} 07 / 26 / 2010		
Purpose of Disbursement: Subscription for email service			Transaction ID: H4.6988		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.25		166.47		210.72

B. Full Name (Last, First, Middle Initial) Chase Cards			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15153			Allocated Activity or Event Year-To-Date 12626.74		
City State Zip Code Wilmington DE 19886	Category/ Type 003		Date ^{M M} / ^{D D} / ^{Y Y Y Y} 07 / 31 / 2010		
Purpose of Disbursement: Remittance envelopes and NTD doorhangers			Transaction ID: H4.6979		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.80		860.73		1089.53

C. Full Name (Last, First, Middle Initial) North Shore Printers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 535 S Sheridan Rd			Allocated Activity or Event Year-To-Date 0.00		
City State Zip Code Waukegan IL 60085	Category/ Type 003		Date ^{M M} / ^{D D} / ^{Y Y Y Y} 07 / 26 / 2010		
Purpose of Disbursement: Remittance envelopes & NTD flyers			Transaction ID: H4.6981		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.80		860.73		1089.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
228.80		860.73		1089.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
562.85		2117.40		2680.25